

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 04, 2008 8:00 am
Secretary of State

02-04-2008 90054 012 ***158.75

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1. Entity Name
GIBRALTAR CONSTRUCTION COMPANY, INC.



Principal Place of Business
**42 HUDSON ST., STE. 107
ANNAPOLIS, MD 21401**

Mailing Address
**42 HUDSON ST., STE. 107
ANNAPOLIS, MD 21401**

40017563



01252008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
52-0982154

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**REGISTERED AGENTS LEGAL SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
BERNHARDT, PHILLIP
304 LOCUST THORN COURT
MILLERSVILLE, MD 21108**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
FORMAN, STEVEN
202 ROCK RIDGE ROAD
MILLERSVILLE, MD 21108**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
CUNNINGHAM, BRUCE
302 FOREST HILL DRIVE
COCOA, FL 32926**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
FRAVEL, ELIZABETH
1498 AMBERWOOD SOUTH
ANNAPOLIS, MD 21401**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
BABBITT, ROBERT
331 KIDWELL AVE
CENTREVILLE, MD 21617**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
FACH, DOUGLAS
1059 BALTIMORE-ANNAPOLIS BLVD
ARNOLD, MD 21012**

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Elizabeth W. Fravel* **ELIZABETH FRAVEL** 1/25/08 (410)513-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #