

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000002419

Entity Name: THE GORDIAN ASSOCIATES, INC.

FILED  
Jan 14, 2009  
Secretary of State

## Current Principal Place of Business:

140 BRIDGES ROAD  
SUITE E  
MAULDIN, SC 29662 US

## New Principal Place of Business:

## Current Mailing Address:

140 BRIDGES ROAD  
SUITE E  
MAULDIN, SC 29662 US

## New Mailing Address:

FEI Number: 58-1900371

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: MELLON, HARRY H  
Address: 930 TAHOE BLVD. UNIT 226  
City-St-Zip: INCLINE VILLAGE, NV 89451

Title: T ( ) Delete  
Name: SNOW, EDWARD A  
Address: 205 SUN MEADOW RD.  
City-St-Zip: GREER, SC 29650

Title: P ( ) Delete  
Name: COFFEY, ROBERT D  
Address: 9 AVENS HILL DRIVE  
City-St-Zip: GREER, SC 29651

Title: VP ( ) Delete  
Name: MAHLER, DAVID L  
Address: 113 CLAIREWOOD CT  
City-St-Zip: GREENVILLE, SC 29615

Title: CC ( ) Delete  
Name: SCHREYER, PAUL R  
Address: 2 MILLER ROAD  
City-St-Zip: DARIEN, CT 06820

Title: D ( ) Delete  
Name: KORTICK, DANIEL M  
Address: 405 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10022

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID L. MAHLER

VP

01/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date