

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001997

FILED
Jan 18, 2008
Secretary of State

Entity Name: ANDREW W. BOOTH AND ASSOCIATES, INC.

Current Principal Place of Business:

1942 NORTHWOOD DRIVE
SALISBURY, MD 218017824

New Principal Place of Business:

Current Mailing Address:

1942 NORTHWOOD DRIVE
SALISBURY, MD 218017824

New Mailing Address:

FEI Number: 52-1301174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHILDERS, ROY K
5694 SOUCHAK DR.
WEST PALM BEACH, FL 33413 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: CD () Delete
Name: BOOTH, ANDREW W
Address: 8402 HILDA DRIVE
City-St-Zip: SALISBURY, MD 21804

Title: VD (X) Delete
Name: STUCHLIK IV, CHARLES F
Address: 22698 BRIARWOOD ROAD
City-St-Zip: GEORGETOWN, DE 19947

Title: SD () Delete
Name: SHAHAN, JOHN R
Address: 3424 RESIDENTIAL DRIVE
City-St-Zip: ALLEN, MD 21810

Title: PD () Delete
Name: SMITH, MATTHEW R
Address: 32237 LONGRIDGE ROAD
City-St-Zip: PARSONSBURG, MD 21849

Title: VD () Delete
Name: DREW, G. MATTHEW
Address: 4912 NUTTERS CROSS ROAD
City-St-Zip: SALISBURY, MD 21804

Title: D () Delete
Name: OLDLAND, KEVIN B
Address: 327 NORTH BEDFORD STREET
City-St-Zip: GEORGETOWN, DE 19947

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: MATTHEW R. SMITH

PD

01/18/2008

Electronic Signature of Signing Officer or Director

Date