## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F97000005919

FILED Jan 16, 2007 Secretary of State

Entity Name: FOSTER ASSOCIATES INCORPORATED ECONOMIC CONSULTANTS

**Current Principal Place of Business: New Principal Place of Business:** 4550 MONTGOMERY AVE, SUITE 350N ATTN: JULIE OBENAUER BETHESDA, MD 20814 **Current Mailing Address: New Mailing Address:** 4550 MONTGOMERY AVE, SUITE 350N ATTN: JULIE OBENAUER BETHESDA, MD 20814 FEI Number: 52-0957975 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JAMES L. GOETZ, P.A 2133 WINKLER AVE, SUITE 300 FORT MYERS, FL 33911 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PRFS** ( ) Delete Title: () Change () Addition Name: BRICKHILL, JOHN A Name: 4550 MONTGOMERY AVE, SUITE 350N Address: Address: City-St-Zip: BETHESDA, MD 20814 City-St-Zip: VΡ Title: Title: () Delete (X) Change ( ) Addition Name: FOSTER, WILLIAM G Name: MCSHANE, KATHLEEN C 4550 MONTGOMERY AVE, SUITE 350N 4550 MONTGOMERY AVE, SUITE 350N Address: Address: City-St-Zip: BETHESDA, MD 20814 City-St-Zip: BETHESDA, MD 20814 ( ) Delete Title: (X) Change ( ) Addition Title: VΡ MCSHANE, KATHLEEN C WHITE, RONALD Name: Name: 4550 MONTGOMERY AVE, SUITE 350N 4550 MONTGOMERY AVE, SUITE 350N Address: Address: BETHESDA, MD 20814 City-St-Zip: BETHESDA, MD 20814 City-St-Zip: Title: VΡ ( ) Delete Title: VΡ (X) Change ( ) Addition WHITE, RONALD E BARON, DONALD Name: Name: Address: 4550 MONTGOMERY AVE, SUITE 350N Address: 4550 MONTGOMERY AVE, SUITE 350N City-St-Zip: BETHESDA, MD 20814 City-St-Zip: BETHESDA, MD 20814 Title: Title: ( ) Change (X) Addition () Delete OBENAUER, JULIA Name: Name: Address: 4550 MONTGOMERY AVENUE, SUITE 350N Address: City-St-Zip: City-St-Zip: BETHESDA, MD 20814

I hereby certify that the information supplied with this filing does not qualify for the 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: JULIA C OBENAUER VP 01/16/2007