2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2008
Secretary of State

DOCUMENT# F97000005919

Entity Name: FOSTER ASSOCIATES INCORPORATED ECONOMIC CONSULTANTS

Current Principal Place of Business:

4550 MONTGOMERY AVE, SUITE 350N
ATTN: JULIE OBENAUER
BETHESDA, MD 20814

New Principal Place of Business:

Current Mailing Address:

4550 MONTGOMERY AVE, SUITE 350N
ATTN: JULIE OBENAUER
BETHESDA, MD 20814

New Mailing Address:

FEI Number: 52-0957975 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JAMES L. GOETZ, P.A.
2133 WINKLER AVE, SUITE 300
FORT MYERS, FL 33911 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: PRES ( ) Delete
Name: BRICKHILL, JOHN A
Address: 4550 MONTGOMERY AVE, SUITE 350N
City-St-Zip: BETHESDA, MD 20814

Title: VP ( ) Delete
Name: MCSHANE, KATHLEEN C
Address: 4550 MONTGOMERY AVE, SUITE 350N
City-St-Zip: BETHESDA, MD 20814

Title: VP ( ) Delete
Name: WHITE, RONALD
Address: 4550 MONTGOMERY AVE, SUITE 350N
City-St-Zip: BETHESDA, MD 20814

Title: VP ( ) Delete
Name: BARON, DONALD
Address: 4550 MONTGOMERY AVE, SUITE 350N
City-St-Zip: BETHESDA, MD 20814

Title: VP (X) Delete
Name: OBENAUER, JULIA
Address: 4550 MONTGOMERY AVENUE, SUITE 350N
City-St-Zip: BETHESDA, MD 20814

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: MCSHANE, KATHLEEN C
Address: 4550 MONTGOMERY AVE, SUITE 350N
City-St-Zip: BETHESDA, MD 20814

Title: VP (X) Change ( ) Addition
Name: BARON, DONALD
Address: 4550 MONTGOMERY AVE, SUITE 350N
City-St-Zip: BETHESDA, MD 20814

Title: CHRM (X) Change ( ) Addition
Name: WHITE, RONALD
Address: 4550 MONTGOMERY AVE, SUITE 350N
City-St-Zip: BETHESDA, MD 20814

Title: VP (X) Change ( ) Addition
Name: OBENAUER, JULIA
Address: 4550 MONTGOMERY AVE, SUITE 350N
City-St-Zip: BETHESDA, MD 20814

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: JULIA C OBENAUER CONT 01/20/2008

Electronic Signature of Signing Officer or Director — Date