2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# K86866

Entity Name: J. GIBSON MCILVAIN COMPANY

Current Principal Place of Business:

C/O CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD., #250
PLANTATION, FL 333244459 US

New Principal Place of Business:

Current Mailing Address:

J GIBSON MCILVAIN CO
PO BOX 222
WHITE MARSH, MD 21162 US

New Mailing Address:

FEI Number: 52-1628135 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: VPD ( ) Delete
Name: CROSS, LARRY
Address: 109 ARBUTUS DR
City-St-Zip: JOPPA, MD 21085

Title: PD ( ) Delete
Name: MCILVAIN, GIBSON J III
Address: BOX 1005
City-St-Zip: NEW LONDON, PA

Title: VD ( ) Delete
Name: MCALLISTER, SCOT
Address: 611 HICKORY OVERLOOK DRIVE
City-St-Zip: BEL AIR, MD 21014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VPD (X) Change ( ) Addition
Name: MCALLISTER, SCOT
Address: 611 HICKORY OVERLOOK DRIVE
City-St-Zip: BEL AIR, MD 21014

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: SCOT A. MCALLISTER VPD 01/14/2009

Electronic Signature of Signing Officer or Director — Date