

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18494

Entity Name: MCKINLEY ASSOCIATES, INC.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

320 N MAIN STREET
200
ANN ARBOR, MI 48104

New Principal Place of Business:

Current Mailing Address:

320 N. MAIN STREET
200
ANN ARBOR, MI 48104

New Mailing Address:

FEI Number: 38-1998306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALEITA, GARY M.
215 N. EOLA DR.
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

SIGNER, GREG
124 E WELBOURNE AVENUE
WINTER PARK, FL 32789 US

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: GREG SIGNER

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: EVP () Delete
Name: HAYWARD, D. KEITH
Address: 320 N. MAIN STREET
City-St-Zip: ANN ARBOR, MI 48104

Title: CEO () Delete
Name: BERRIZ, ALBERT M.
Address: 320 NORTH MAIN STREET
City-St-Zip: ANN ARBOR, MI 48104

Title: CAO () Delete
Name: ANDREWS, KAREN A
Address: 320 NORTH MAIN STREET
City-St-Zip: ANN ARBOR, MI 48104

Title: CIO () Delete
Name: KLEINSCHMIDT, JEFFREY
Address: 320 NORTH MAIN STREET
City-St-Zip: ANN ARBOR, MI 48104

Title: VP () Delete
Name: SMITH, LESLIE
Address: 320 NORTH MAIN STREET
City-St-Zip: ANN ARBOR, MI 48104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COO (X) Change () Addition
Name: HAYWARD, D. KEITH
Address: 320 N. MAIN STREET
City-St-Zip: ANN ARBOR, MI 48104

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

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

Title: TREA (X) Change () Addition
Name: WILLETT, JAMES
Address: 320 NORTH MAIN STREET
City-St-Zip: ANN ARBOR, MI 48104

Title: SECR (X) Change () Addition
Name: LEWS, NATE
Address: 320 NORTH MAIN STREET
City-St-Zip: ANN ARBOR, MI 48104

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: CHERYL RABBITT

VP

04/16/2009

Electronic Signature of Signing Officer or Director

Date