## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P26734

Entity Name: GANNETT FLEMING, INC.

FILED Mar 25, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 207 SENATE AVE CAMP HILL, PA 17011 US **Current Mailing Address: New Mailing Address:** PO BOX 67100 HARRISBURG, PA 17106 US FEI Number: 25-1613591 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DOUGHERTY, JOHN V 10751 DEERWOOD PARK BLVD. JACKSONVILLE, FL 32256 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition DIETZ, ROBERT J Name: Name: 740 BRENTWATER ROAD Address: Address: City-St-Zip: CAMP HILL, PA 17011 City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition Name: DRNEVICH, RONALD J Name: STOUT, WILLIAM M 989 NORTH FAIRVILLE AVE 220 NORTHGATE DRIVE Address: Address: HARRISBURG, PA 17112 CAMP HILL, PA 17011 City-St-Zip: City-St-Zip: Title: VSD () Delete Title: () Change () Addition ALLEN, CHESTER L Name: Name: 319 CANDLELIGHT DRIVE Address: Address: MECHANICS BURG, PA 17055 City-St-Zip: City-St-Zip: Title: VD () Delete Title: () Change () Addition BANKS, ROGER J Name: Name: Address: 501 EAST MAIN STREET Address: City-St-Zip: MOORESTOWN, NJ 08057 City-St-Zip: Title: ( ) Delete Title: () Change () Addition KNEPP, LYNN E Name: Name: 2141 CAREY WAY Address: Address: City-St-Zip: HUMMELSTOWN, PA 17036 City-St-Zip: Title: () Delete Title: () Change () Addition DOUGHERTY, JOHN V Name: Name: Address: 1774 LOQUAT LANE Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32246

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: LYNN E. KNEPP VT 03/25/2008