2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2009
Secretary of State

DOCUMENT# P33327

Entity Name: THE GOODMAN-GABLE-GOULD COMPANY

Current Principal Place of Business:

6 RESERVOIR CIRCLE
SUITE 202
BALTIMORE, MD 21208

New Principal Place of Business:

Current Mailing Address:

6 RESERVOIR CIRCLE
SUITE 202
BALTIMORE, MD 21208

New Mailing Address:

FEI Number: 52-0330575 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MERLIN, WILLIAM ESQ.
601 S. BAYSHORE BLVD.
STE. 800
TAMPA, FL 33606 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: C ( ) Delete
Name: GOODMAN, WILLIAM R
Address: 6 RESERVOIR CIRCLE, SUITE 202
City-St-Zip: BALTIMORE, MD 21208

Title: P ( ) Delete
Name: GOODMAN, HARVEY M
Address: 10110 MOLECULAR DRIVE STE 300
City-St-Zip: ROCKVILLE, MD 20850

Title: EVP ( ) Delete
Name: DENISON, KARL L
Address: 10110 MOLECULAR DRIVE STE 300
City-St-Zip: ROCKVILLE, MD 20850

Title: EVP ( ) Delete
Name: KAHN, NEIL C
Address: 6 RESERVOIR CIRCLE, STE. 202
City-St-Zip: BALTIMORE, MD 21208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: NEIL C KAHN EVP 02/13/2009

Electronic Signature of Signing Officer or Director — Date