

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33327

FILED  
Jan 15, 2010  
Secretary of State

**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  
**Name:** GOODMAN, WILLIAM R  
**Address:** 6 RESERVOIR CIRCLE, SUITE 202  
**City-St-Zip:** BALTIMORE, MD 21208

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

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

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

I hereby 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 all other like empowered.

**SIGNATURE:** NEIL C. KAHN

EVP

01/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date