

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P39872

FILED  
Feb 12, 2009  
Secretary of State

Entity Name: GORDON FAY ASSOCIATES, INC.

## Current Principal Place of Business:

420 WASHINGTON STREET, SUITE 401  
BRAINTREE, MA 02184

## New Principal Place of Business:

## Current Mailing Address:

420 WASHINGTON STREET, SUITE 401  
BRAINTREE, MA 02184

## New Mailing Address:

FEI Number: 04-2629169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FAY, GORDON H.  
4110 CENTERPOINTE DR  
FORT MYERS, FL 339169445 US

## Name and Address of New Registered Agent:

FAY, GORDON H  
4110 CENTER POINTE DR. SUITE 207  
FORT MYERS, FL 339169424 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: GORDON H. FAY

02/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: FAY, GORDON H.,  
Address: 4110 CENTER POINTE DR #207  
City-St-Zip: FORT MYERS, FL 33916

Title: VPD ( ) Delete  
Name: FAY, SUSAN J.,  
Address: 4110 CENTER POINTE DR #207  
City-St-Zip: FORT MYERS, FL 33916

Title: S ( ) Delete  
Name: BROWN, NATHANIAL K.,  
Address: 110 GREAT RD  
City-St-Zip: BEDFORD, MA 01730

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: FAY, GORDON H.,  
Address: 4110 CENTER POINTE DR. SUITE 207  
City-St-Zip: FORT MYERS, FL 339169424

Title: VPD (X) Change ( ) Addition  
Name: FAY, SUSAN J.,  
Address: 4110 CENTER POINTE DR. SUITE 207  
City-St-Zip: FORT MYERS, FL 339169424

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: GORDON H. FAY

DIR

02/12/2009

Electronic Signature of Signing Officer or Director

Date