# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 06, 2011**
**Secretary of State**

DOCUMENT# P94000093751

**Entity Name:** GMH CONSTRUCTION COMPANY, INC.

**Current Principal Place of Business:**

10 CAMPUS BOULEVARD
NEWTOWN SQUARE, PA 19073

**New Principal Place of Business:**

**Current Mailing Address:**

10 CAMPUS BOULEVARD
NEWTOWN SQUARE, PA 19073

**New Mailing Address:**

**FEI Number: 23-2792053** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR., SUITE A
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: P
Name: HOLLOWAY, GARY M
Address: 10 CAMPUS BLVD
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: ASEC
Name: CARDAMONE, ANTHONY J
Address: 10 CAMPUS BLVD
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: VP
Name: MACCHIONE, JOSEPH M
Address: 10 CAMPUS BOULEVARD
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: VP
Name: HOLLOWAY, JR., GARY M
Address: 10 CAMPUS BOULEVARD
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: ASEC
Name: DIGIUSEPPE, ROBERT
Address: 10 CAMPUS BOULEVARD
City-St-Zip: NEWTOWN SQUARE, PA 19073

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: JOSEPH MACCHIONE VP 01/06/2011

Electronic Signature of Signing Officer or Director Date