

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000003221

**Entity Name:** WILLIAM A. GRAHAM COMPANY**Current Principal Place of Business:**THE GRAHAM BUILDING  
30 SOUTH 15TH STREET  
PHILADELPHIA, PA 19102**Current Mailing Address:**THE GRAHAM BUILDING  
30 SOUTH 15TH STREET  
PHILADELPHIA, PA 19102 US**FEI Number:** 23-1570876**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DR STE A  
TALLAHASSEE, FL 32301 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

**Officer/Director Detail :**

Title	DIRECTOR, CEO
Name	GRAHAM, WILLIAM A
Address	THE GRAHAM BUILDING 30 SOUTH 15TH STREET
City-State-Zip:	PHILADELPHIA PA 19102

Title	PRESIDENT, COO
Name	EWELL, KENNETH L
Address	THE GRAHAM BUILDING 30 SOUTH 15TH STREET
City-State-Zip:	PHILADELPHIA PA 19102

Title	VP, SECRETARY
Name	CAREY, LUCILLE
Address	THE GRAHAM BUILDING 30 SOUTH 15TH STREET
City-State-Zip:	PHILADELPHIA PA 19102

Title	TREASURER
Name	HENRY, ROBERT
Address	THE GRAHAM BUILDING 30 SOUTH 15TH STREET
City-State-Zip:	PHILADELPHIA PA 19102

Title	VP
Name	PRINSEN, A. PETER
Address	THE GRAHAM BUILDING 30 SOUTH 15TH STREET
City-State-Zip:	PHILADELPHIA PA 19102

Title	VP
Name	DANIELE, DINA L
Address	THE GRAHAM BUILDING 30 SOUTH 15TH STREET
City-State-Zip:	PHILADELPHIA PA 19102

Title	VP
Name	SCULLIN, ROBERT J
Address	THE GRAHAM BUILDING 30 SOUTH 15TH STREET
City-State-Zip:	PHILADELPHIA PA 19102

Title	DIRECTOR, VICE CHAIRMAN
Name	MITCHELL, MICHAEL J
Address	THE GRAHAM BUILDING 30 SOUTH 15TH STREET
City-State-Zip:	PHILADELPHIA PA 19102

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*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:** LUCILLE CAREY**SECRETARY****04/20/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	VP
Name	MORRIN, THOMAS
Address	THE GRAHAM BUILDING 30 SOUTH 15TH STREET
City-State-Zip:	PHILADELPHIA PA 19102