

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003911

FILED
Feb 19, 2009
Secretary of State

Entity Name: NOELKER AND HULL ASSOCIATES, INCORPORATED

Current Principal Place of Business:

30 WEST KING STREET
CHAMBERSBURG, PA 17201

New Principal Place of Business:

Current Mailing Address:

30 WEST KING STREET
CHAMBERSBURG, PA 17201

New Mailing Address:

FEI Number: 25-1223851 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEERIN, MICHAEL
255 SOUTH ORANGE AVENUE
SUITE 1600
ORLANDO, FL 32801 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: P () Delete
Name: HULL, MICHAEL G
Address: 4670 DEER SPRING ROAD
City-St-Zip: BRADDOCK HEIGHTS, MD 21714

Title: VP () Delete
Name: ALLEN-HALL, MICHAEL
Address: 522 LARKAPUR LN
City-St-Zip: CHAMBERSBURG, PA 17201

Title: S () Delete
Name: HARSHMAN, TODD
Address: 7893 GOLF VISTA DR
City-St-Zip: GREENCASTLE, PA 17225

Title: T () Delete
Name: HARSHMAN, TODD
Address: 7893 GOLF VISTA DR
City-St-Zip: GREENCASTLE, PA 17225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: ALLEN-HALL, MICHAEL
Address: 522 LARKAPUR LN
City-St-Zip: CHAMBERSBURG, PA 17201

Title: T (X) Change () Addition
Name: HARSHMAN, TODD
Address: 7893 GOLF VISTA DR
City-St-Zip: GREENCASTLE, PA 17225

Title: VP (X) Change () Addition
Name: CHRISTENSON, STUART
Address: 107 WESTGATE DRIVE
City-St-Zip: MT. HOLLY SPRINGS, PA 17065

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: MICHAEL G. HULL

Electronic Signature of Signing Officer or Director

PRES

02/19/2009

_____ Date