



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK  
\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 132060		2. Name of Corporation Building Exchange Company			
3. Street Address Principal Business Office 5600 Cox Road			City Glen Allen	State VA	Zip 23060
4. Business Phone No. 804-267-8000		5. State of Incorporation Virginia			
6. Brief Description of the Character of Business Conducted in Rhode Island Exchange Intermediary					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Jeffrey C. Selby		Vice President Name J. Kevin Kelly			
Street Address 5600 Cox Road		Street Address 5600 Cox Road			
City Glen Allen	State VA	Zip 23060	City Glen Allen	State VA	Zip 23060
Secretary Name Anna M. King		Treasurer Name Ronald B. Ramos			
Street Address 5600 Cox Road		Street Address 5600 Cox Road			
City Glen Allen	State VA	Zip 23060	City Glen Allen	State VA	Zip 23060
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Stephen M. Connor		Director Name Jeffrey C. Selby			
Street Address 10 S. LaSalle Street, Suite 2501		Street Address 5600 Cox Road			
City Chicago	State IL	Zip 60603	City Glen Allen	State VA	Zip 23060
Director Name G. William Evans		Director Name			
Street Address 5600 Cox Road		Street Address			
City Glen Allen	State VA	Zip 23060	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	Common	No par value	100	Common	No par value

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CORPORATIONS DIV  
2008 FEB 23  
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This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED  
FEB 28 2008  
By: [Signature]  
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  
Signature: [Signature] Date: 2-26-08  
Anna M. King  
Print or Type Name  
Vice President and Secretary  
Title