

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000003357

FILED
Apr 02, 2012
Secretary of State

Entity Name: WACO ASSOCIATES, INC.

Current Principal Place of Business:

11471 COLUMBIA PARK DR. WEST
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

ATTN: CFO
2546 GENERAL ARMISTEAD AVE.
NORRISTOWN, PA 19403

New Mailing Address:

2546 GENERAL ARMISTEAD AVE.
NORRISTOWN, PA 19403

FEI Number: 23-2386877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
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: ROSE, JEFFREY A
Address: 2546 GEN. ARMISTEAD AVE.
City-St-Zip: NORRISTOWN, PA 19403

Title: CFO
Name: CHERRY, ROBERT M CFO
Address: 2546 GEN. ARMISTEAD AVE.
City-St-Zip: NORRISTOWN, PA 19403

Title: S, T
Name: UDELHOFEN, JOHN
Address: 500 W. MADISON ST, SITE 3890
City-St-Zip: CHICAGO, IL 60661

Title: VP
Name: NEBOR, JAMES J
Address: 912 E. WASHINGTON ST
City-St-Zip: JOLIET, IL 60433

Title: VP
Name: VAN GETSON, AARON J
Address: 500 W. MADISON ST., SUITE 3890
City-St-Zip: CHICAGO, IL 60661

Title: VP
Name: BALL, DAVID J
Address: 500 W. MADISON ST., SUITE 3890
City-St-Zip: CHICAGO, IL 60661

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: ROBERT CHERRY

CFO

04/02/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date