## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

**SIGNATURE:** 

## May 03, 2005 8:00 am Secretary of State DOCUMENT # F9800001677 05-03-2005 90151 001 \*\*\*150.00 1. Entity Name WESTMINSTER ABSTRACT COMPANY Principal Place of Business Mailing Address 3103 PHILMONT AVE. 3103 PHILMONT AVE. 20054700 HUNTINGDON VALLEY, PA 19006 HUNTINGDON VALLEY, PA 19006 2. Principal Place of Business 3. Mailing Address 250 Gibraltar Road 250 Gibraltar Road 03242005 Chg-P CR2E034 (10/03) City & State City & State Applied For 4. FEI Number Horsham, PA Horsham, PA 23-2671937 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 19044 19044 Montgomery Montgomery 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PSTD **X** Addition TITLE Defete TITLE ☐ Change GARY, KENNETH J William Unkel NAME NAME STREET ADDRESS 3103 PHILMONT AVE. STREET ADDRESS 250 Gibraltar Road HUNTINGDON VALLEY, PA 19006 CITY-ST-ZIF CITY-ST-7IP Horsham, PA 19044 TITLE Delete TITLE ☐ Change Addition NAME Wayne S. Patterson STREET ADDRESS STREET ADDRESS 250 Gibraltar Road CITY-ST-ZIP CITY-ST-ZIP Horsham, PA 19044 TITLE ☐ Delete TITLE VP ☐ Change Addition NAME James Brown STREET ADORESS STREET ADDRESS 250 Gibraltar Road CITY-ST-ZIP CITY-ST-ZIP Horsham, PA 19044 Delete TITLE TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other likelegropowered. Wayne S. Patterson

Wayne S. Patterson Secretary & Treasurer

Daytime Phone 6

FILED