

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K55698

FILED
Feb 17, 2011
Secretary of State

Entity Name: MW INVESTMENT CORP.

Current Principal Place of Business:

1001 E ATLANTIC AVE.
STE. 202
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

1000 MARKET ST
BLDG 1
PORTSMOUTH, NH 03801 US

New Mailing Address:

FEI Number: 65-0256514 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRITCHFIELD, RICHARD H.
1001 E ATLANTIC AVE
DELRAY BEACH, FL 33483 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: WALSH, MARK
Address: 1001 EAST ATLANTIC AVE., STE. 202
City-St-Zip: DELRAY BEACH, FL 33483

Title: V
Name: MCMURRAIN, THOMAS T.
Address: 1001 EAST ATLANTIC AVE., STE. 202
City-St-Zip: DELRAY BEACH, FL 33483

Title: S
Name: CRITCHFIELD, RICHARD H.
Address: 1001 EAST ATLANTIC AVE., STE. 201
City-St-Zip: DELRAY BEACH, FL 33483

Title: V
Name: WALSH, MICHAEL
Address: 1001 E. ATLANTIC AVE.
City-St-Zip: DELRAY BEACH, FL 33483

Title: EVP
Name: ADE, RICHARD
Address: 1000 MARKET STREET, SUITE 300
City-St-Zip: PORTSMOUTH, NH 03801

Title: V
Name: WALSH, WILLIAM
Address: 1000 MARKET STREET, SUITE 300
City-St-Zip: PORTSMOUTH, NH 03801

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: RICHARD C. ADE

EVP

02/17/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date