

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07695

FILED
Mar 29, 2011
Secretary of State

Entity Name: ATLANTIC UNION RESOURCES, INC.

Current Principal Place of Business:

2720 ELLSMERE AVE.
NORFOLK, VA 32513 US

New Principal Place of Business:

Current Mailing Address:

1500 SPRING GARDEN ST
PHILADELPHIA, PA 19130 US

New Mailing Address:

FEI Number: 54-1243235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
% C T CORPORATION SYSTEM
1200 PINE ISLAND ROAD
PLANTATION, FL 33324 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: MC KINNEY, GARY M.
Address: 1827 FREEDOM ROAD STE 101
City-St-Zip: LANCASTER, PA 17601

Title: D
Name: MCMAHON, MICHAEL P
Address: 1500 SPRING GARDEN ST
City-St-Zip: PHILADELPHIA, PA 19130

Title: TR
Name: HAWKINS, M. PRESTON
Address: 1500 SPRING GARDEN ST
City-St-Zip: PHILADELPHIA, PA 19130

Title: VP
Name: FITZSIMMONS, ROBERT J
Address: 1500 SPRING GARDEN ST
City-St-Zip: PHILADELPHIA, PA 19130

Title: AS
Name: DIMAIO, MARY ANN
Address: 1500 SPRING GARDEN ST
City-St-Zip: PHILADELPHIA, PA 19130

Title: S
Name: FAST, SCOTT L
Address: 1500 SPRING GARDEN ST
City-St-Zip: PHILADELPHIA, PA 19130

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: MARY ANN DI MAIO

AS

03/29/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date