

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38037

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** CERTA PROPAINTERS LTD. INC.

**Current Principal Place of Business:**

150 GREEN TREE RD  
SUITE 1003  
OAKS, PA 19456 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

**New Mailing Address:**

**FEI Number:** 04-3140719      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: CFO  
Name: LEIBY, JAMES S  
Address: 150 GREEN TREE ROAD, SUITE 1003  
City-St-Zip: OAKS, PA 19456

Title: PD  
Name: CHASE, CHARLES E  
Address: 150 GREEN TREE ROAD, SUITE 1003  
City-St-Zip: OAKS, PA 19456

Title: CEO  
Name: CHASE, CHARLES E  
Address: 150 GREEN TREE ROAD, SUITE 1003  
City-St-Zip: OAKS, PA 19456

Title: D  
Name: ROGERS, STEVEN S  
Address: 5397 EGLINTON AVE. WEST, SUITE 108  
City-St-Zip: ETOBICOKE, ON M9C 5K6

Title: DST  
Name: ROY, KEVIN  
Address: 5397 EGLINTON AVE. WEST, SUITE 108  
City-St-Zip: ETOBICOKE, ON M9C 5K6 CA

Title: GC  
Name: MCMONAGLE, MARY  
Address: 150 GREEN TREE RD., SUITE 1003  
City-St-Zip: OAKS, PA 19456

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: KEVIN ROY

S

04/26/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date