

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006028

FILED
Apr 24, 2012
Secretary of State

Entity Name: ARBORMETRICS SOLUTIONS, INC.

Current Principal Place of Business:

708 BLAIR MILL ROAD
WILLOW GROVE, PA 19090

New Principal Place of Business:

Current Mailing Address:

708 BLAIR MILL ROAD
WILLOW GROVE, PA 19090

New Mailing Address:

FEI Number: 20-4928686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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: D
Name: ASPLUNDH, SCOTT M
Address: 1591 HAMPTON RD
City-St-Zip: MEADOWBROOK, PA 19046

Title: VD
Name: ASPLUNDH, STEVEN G
Address: 2100 BUTTONWOOD LN
City-St-Zip: HUNTINGDON VALLEY, PA 19006

Title: PD
Name: GRAHAM, GEORGE E JR
Address: 1820 VALLEY ROAD
City-St-Zip: MEADOWBROOK, PA 19046

Title: STD
Name: DWYER, JOSEPH P
Address: 419 SHOEMAKER WAY
City-St-Zip: LANSDALE, PA 19446

Title: AT
Name: BAUER, BRIAN R
Address: 442 SUNSET DRIVE
City-St-Zip: SOUTHAMPTON, PA 18966

Title: TAX
Name: SIMPSON, RONALD
Address: 1760 LUDWELL DRIVE
City-St-Zip: MAPLE GLEN, PA 19002

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: RONALD SIMPSON

TAX

04/24/2012

Electronic Signature of Signing Officer or Director

Date