

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003174

FILED
Jan 16, 2015
Secretary of State
CC0767661087

Entity Name: COZEN O'CONNOR, PC

Current Principal Place of Business:

1900 MARKET STREET
PHILADELPHIA, PA 19103

Current Mailing Address:

1900 MARKET STREET
PHILADELPHIA, PA 19103

FEI Number: 23-1732832

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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

Officer/Director Detail :

Title CEO & PRESIDENT
Name HELLER, MICHAEL J
Address 1900 MARKET STREET
City-State-Zip: PHILADELPHIA PA 19103

Title CFO
Name STAINS, CYNDI
Address 1900 MARKET STREET
City-State-Zip: PHILADELPHIA PA 19103

Title VP
Name FELDMAN, ELLIOTT R
Address 1900 MARKET STREET
City-State-Zip: PHILADELPHIA PA 19103

Title VP/S
Name BLOCH, SANDRA A
Address 1900 MARKET STREET
City-State-Zip: PHILADELPHIA PA 19103

Title T/AS
Name ELLMAN, DAVID W
Address 1900 MARKET STREET
City-State-Zip: PHILADELPHIA PA 19103

Title VP & MANAGING PARTNER
Name MCGUINNESS, VINCENT R
Address 1900 MARKET STREET
City-State-Zip: PHILADELPHIA PA 19103

Title VP
Name WEIL, JEFFREY G
Address 1900 MARKET STREET
City-State-Zip: PHILADELPHIA PA 19103

Title VP
Name LEONARD, JEFFREY A
Address 1900 MARKET STREET
City-State-Zip: PHILADELPHIA PA 19103

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: DAVID W. ELLMAN

T/AS

01/16/2015

Electronic Signature of Signing Officer/Director Detail

Date