

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2005 8:00 am
Secretary of State

07-06-2005 90033 034 ***558.75

DOCUMENT # 824414

1. Entity Name
M.A. BRUDER & SONS, INCORPORATED



Principal Place of Business
**600 REED ROAD
 BROOMALL, PA 19008-3505**

Mailing Address
**600 REED ROAD
 BROOMALL, PA 19008-3505**

50055017



07012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 23-1275778	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324**

**DO NOT WRITE
 IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$550.00
 Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRUDER, THOMAS A. JR. 600 REED RD. BROOMALL, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST WINTERS, DAVID R. 600 REED RD. BROOMALL, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BRUDER, JAMES J 600 REED RD. BROOMALL, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BRUDER, MICHAEL A. 600 REED ROAD BROOMALL, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASC BURNS, FRANCIS P. 604 WILDE AVE DREXEL HILL, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
 IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Francis P Burns* **Francis P Burns** 7/1/05 610 353 5100
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #