

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836154

FILED  
Feb 18, 2011  
Secretary of State

**Entity Name:** TOWERS WATSON PENNSYLVANIA INC.

**Current Principal Place of Business:**

1500 MARKET STREET  
CENTRE SQUARE EAST  
PHILADELPHIA, PA 19102

**New Principal Place of Business:**

**Current Mailing Address:**

1500 MARKET STREET  
CENTRE SQUARE EAST  
PHILADELPHIA, PA 19102

**New Mailing Address:**

**FEI Number:** 23-1159360      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301      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: MACTAS, MARK V  
Address: ONE STAMFORD PLAZA, 263 TRESSER BLVD  
City-St-Zip: STAMFORD, CT 06901 US

Title: A/S  
Name: MILLER, MARIAN C  
Address: 1500 MARKET ST, CENTRE SQUARE EAST  
City-St-Zip: PHILADELPHIA, PA 19102 US

Title: CFO  
Name: HOGAN, ROBERT G  
Address: ONE STAMFORD PLAZA, 263 TRESSER BLVD  
City-St-Zip: STAMFORD, CT 06901 US

Title: AVP  
Name: CURTIN, JAMES B JR  
Address: 335 MADISON AVENUE  
City-St-Zip: NEW YORK, NY 10017 US

Title: D  
Name: MACTAS, MARK V  
Address: ONE STAMFORD PLAZA, 263 TRESSER BLVD  
City-St-Zip: STAMFORD, CT 06901 US

Title: AVP  
Name: EICHER, ROBERT D  
Address: 335 MADISON AVENUE  
City-St-Zip: NEW YORK, NY 10017 US

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: NORMAN J. BUCHANAN

GTD

02/18/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date