

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006246

FILED
Jan 02, 2008
Secretary of State

Entity Name: ORTH-RODGERS & ASSOCIATES, INC.

Current Principal Place of Business:

18 CAMPUS BLVD
SUITE 210
NEWTOWN SQUARE, PA 19073

New Principal Place of Business:

Current Mailing Address:

18 CAMPUS BLVD
SUITE 210
NEWTOWN SQUARE, PA 19073

New Mailing Address:

FEI Number: 23-2077102 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BLANTON, EDWIN F
810 THOMASVILLE ROAD
TALLAHASSEE, FL 32303 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: PCD () Delete
Name: RODGERS, ROBERT M
Address: 18 CAMPUS BLVD., SUITE 210
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: VD () Delete
Name: GREENE, JEFFREY L
Address: 230 S. BROAD STREET
City-St-Zip: PHILADELPHIA, PA

Title: SD () Delete
Name: BOLT, STEVEN B
Address: 301 LINDENWOOD DRIVE, SUITE 130
City-St-Zip: MALVERN, PA 19355

Title: T () Delete
Name: RODGERS, MICHAEL J
Address: 18 CAMPUS BLVD, SUITE 210
City-St-Zip: NEWTOWN SQUARE, PA 19073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL J. RODGERS

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01/02/2008

Electronic Signature of Signing Officer or Director

_____ Date