

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2007 08:00 AM
Secretary of State

DOCUMENT # F04000002333

1. Entity Name
IHS ACQUISITION XXX, INC.



Principal Place of Business
1300 MORRIS DR
CHESTERBROOK, PA 19087

Mailing Address
1300 MORRIS DR
CHESTERBROOK, PA 19087



04022007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
52-2060810

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH 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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	YOST, R. DAVID
STREET ADDRESS	1300 MORRIS DRIVE
CITY - ST - ZIP	CHESTERBROOK, PA 190875594
TITLE	DEVP
NAME	DICANDILO, MICHAEL D
STREET ADDRESS	1300 MORRIS DRIVE
CITY - ST - ZIP	CHESTERBROOK, PA 190875594
TITLE	D
NAME	HILZINGER, KURT J
STREET ADDRESS	1300 MORRIS DRIVE
CITY - ST - ZIP	CHESTERBROOK, PA 190875594
TITLE	P
NAME	GLEBER, CAROL
STREET ADDRESS	1300 MORRIS DR
CITY - ST - ZIP	WAYNE, PA 19087
TITLE	VT
NAME	HIRST, DANIEL T
STREET ADDRESS	1300 MORRIS DRIVE
CITY - ST - ZIP	CHESTERBROOK, PA 190875594
TITLE	VPS
NAME	CHOU, JOHN
STREET ADDRESS	1300 MORRIS DR
CITY - ST - ZIP	WAYNE, PA 19087

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04/23/07-80058-020 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Daniel T. Hirst
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/5/2007 640 727-7000