

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000000931

Entity Name: PMA MANAGEMENT CORP.

FILED  
Apr 18, 2007  
Secretary of State

**Current Principal Place of Business:**

380 SENTRY PARKWAY  
BLUE BELL, PA 19003

**New Principal Place of Business:**

380 SENTRY PARKWAY  
BLUE BELL, PA 19422

**Current Mailing Address:**

380 SENTRY PARKWAY  
BLUE BELL, PA 19003

**New Mailing Address:**

380 SENTRY PARKWAY  
BLUE BELL, PA 19422

FEI Number: 23-2652239

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HARVEY, GARY W  
2701 N. ROCKY POINT DRIVE  
TAMPA, FL 33607 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: GARY W. HARVEY

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ALTIERE, FRANCIS X  
Address: 380 SENTRY PARKWAY  
City-St-Zip: BLUE BELL, PA 19422

Title: V ( ) Delete  
Name: DUGAN, GEORGE  
Address: 380 SENTRY PARKWAY  
City-St-Zip: BLUE BELL, PA 19422

Title: S ( ) Delete  
Name: PRATTER, ROBERT  
Address: 380 SENTRY PARKWAY  
City-St-Zip: BLUE BELL, PA 19422

Title: T ( ) Delete  
Name: NIGRO, VITO  
Address: 380 SENTRY PARKWAY  
City-St-Zip: BLUE BELL, PA 19422

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: S (X) Change ( ) Addition  
Name: SUTHERLAND, BARBARA  
Address: 380 SENTRY PARKWAY  
City-St-Zip: BLUE BELL, PA 19422

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: BARBARA L. SUTHERLAND

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04/18/2007

Electronic Signature of Signing Officer or Director

Date