


2006 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 26, 2006 8:00 am
Secretary of State

04-11-2006 90104 007 ***150.00

DOCUMENT # F05000001021					
1. Entity Name BUSINESS INFORMATION GROUP OF PENNSYLVANIA INC.					
Principal Place of Business 156 N. GEORGE ST. YORK, PA 17401			Mailing Address 156 N. GEORGE ST. YORK, PA 17401		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent	
Name					
Street Address (P.O. Box Number is Not Acceptable)					
City				FL Zip Code	
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 renewing)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	CP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DOLMETSCH, SCOTT		NAME		
STREET ADDRESS	RD3, BOX 3366		STREET ADDRESS		
CITY - ST - ZIP	SEVEN VALLEY, PA 17360		CITY - ST - ZIP		
TITLE	VV	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DOLMETSCH, JOHN A		NAME		
STREET ADDRESS	2604 WREN TERRACE		STREET ADDRESS		
CITY - ST - ZIP	YORK, PA 17403		CITY - ST - ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BUSS, GEORGE E		NAME		
STREET ADDRESS	635 OLMSTEAD WAY		STREET ADDRESS		
CITY - ST - ZIP	YORK, PA 17404		CITY - ST - ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DRIVER, DANIEL M		NAME		
STREET ADDRESS	3815 SALEM CHURCH RD		STREET ADDRESS		
CITY - ST - ZIP	JARRETTVILLE, MD 21084		CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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: <i>Frederick J. Dailey</i>			Date: <i>1/25/06</i> (77) 849-1019		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		

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01252006 Chg-P CR2E034 (11/05)

4. FEI Number **23-267240** Applied For Not Applicable

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