

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000003244

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Entity Name:** FOXMONT CONSULTING, INC.

**Current Principal Place of Business:**

2000 CLIFF MINE ROAD  
PARK WEST TWO, SUITE 210  
PITTSBURGH, PA 15275

**New Principal Place of Business:**

**Current Mailing Address:**

2000 CLIFF MINE ROAD  
PARK WEST TWO, SUITE 210  
PITTSBURGH, PA 15275

**New Mailing Address:**

**FEI Number:** 25-1756823

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATIOIN SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** D  
**Name:** WIESNER, JOSEPH C  
**Address:** 2000 CLIFF MINE ROAD  
**City-St-Zip:** PITTSBURGH, PA 15275

**Title:** P  
**Name:** WIESNER, JAMES R  
**Address:** 2000 CLIFF MINE ROAD  
**City-St-Zip:** PITTSBURGH, PA 15275

**Title:** CFO  
**Name:** WIESNER, MARY ANN  
**Address:** 2000 CLIFF MINE ROAD  
**City-St-Zip:** PITTSBURGH, PA 15275

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:** JAMES R. WIESNER

PRES

01/12/2011

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

\_\_\_\_\_  
Date