

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001498

FILED  
Mar 30, 2010  
Secretary of State

**Entity Name:** STRATEGIC SETTLEMENT SERVICES, INC.

**Current Principal Place of Business:**

ONE MONROEVILLE CENTRE  
3824 NORTHERN PIKE, 9TH FLOOR  
MONROEVILLE, P 15146

**New Principal Place of Business:**

**Current Mailing Address:**

3800 MARKET STREET  
CAMP HILL, PA 17011

**New Mailing Address:**

**FEI Number:** 20-1077500

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

O'ROURKE, PATRICIA  
3820 SW 59TH TERRACE  
DAVIE, FL 33314 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:** PD  
**Name:** BRAAFHART, JAMI E  
**Address:** 3800 MARKET STREET  
**City-St-Zip:** CAMP HILL, PA 17011

**Title:** SD  
**Name:** RUSSO, PETER J  
**Address:** 3800 MARKET STREET  
**City-St-Zip:** CAMP HILL, PA 17011

**Title:** D  
**Name:** BAYER, DEREK M  
**Address:** 1840 MAYVIEW ROAD  
**City-St-Zip:** BRIDGEVILLE, PA 15017

**Title:** D  
**Name:** PALARINO, JEFFREY J  
**Address:** 1808 CHISLETT STREET  
**City-St-Zip:** PITTSBURGH, PA 15206

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:** JAMI E. BRAAFHART

PRES

03/30/2010

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

\_\_\_\_\_  
Date