2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005428

Entity Name: MANNINGS, U.S.A., INC.

FILED Jul 26, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 660 N.W. ENTERPRISE DR PORT ST. LUCIE, FL 34986 **Current Mailing Address: New Mailing Address:** 660 N.W. ENTERPRISE DR 501 MOSSIDE BLVD NORTH VERSAILLES, PA 15137 PORT ST. LUCIE, FL 34986 FEI Number: 22-2957717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: REGER, MARK 660 N.W. ENTERPRISE DR US PORT ST. LUCIE, FL 34986 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 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SMITH, PETER Name: Name: SANTILLI, ANTHONY 617 SPEEDWELL AVENUE 2256 BRADBURY LANE Address: Address: City-St-Zip: MORRIS PLAINS, NJ 07950 City-St-Zip: NORTH HUNTINGDON, PA 15642

Title: D () Delete Title: VP (X) Change () Addition Name: EBERWEIN, WILLIAM Name: KNOPP, BRIAN

Address: 11 LATTICELEAF PLACE Address: 2358 LINDALE CT.
City-St-Zip: THE WOODLANDS, TX 77382 City-St-Zip: NORTH HUNTINGDON, PA 15642

Title: D () Delete Title: VP (X) Change () Addition Name: LAKE, ROBERT Name: KNOPP, HARRY L

Name: LAKE, ROBERT Name: KNOPP, HARRY L
Address: 38 FAIRCHILD AVENUE Address: 13735 PEEL COURT
City-St-Zip: MORRIS PLAINS, NJ 07950 City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete Title: D (X) Change () Addition

Name:MANNING, RONName:HEIDER, CHARLESAddress:25A STATION ROAD, AINSDALE, SOUTHPORTAddress:540 NEW SALEM ROADCity-St-Zip:MERSEYSIDE PR8 38N (UK), OCCity-St-Zip:UNIONTOWN, PA 15401

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: CHARLES HEIDER COMP 07/26/2009