

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002194

FILED
Apr 29, 2009
Secretary of State

Entity Name: VERTEX OF PENNSYLVANIA, INC.

Current Principal Place of Business:

1041 OLD CASSATT RD
BERWYN, PA 19312

New Principal Place of Business:

Current Mailing Address:

1041 OLD CASSATT RD
BERWYN, PA 19312

New Mailing Address:

FEI Number: 23-2081753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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 () Delete
Name: WESTPHAL, JEFFREY
Address: 1041 OLD CASSATT RD
City-St-Zip: BERWYN, PA 19312

Title: SD () Delete
Name: RADCLIFFE, AMANDA
Address: 1041 OLD CASSATT RD
City-St-Zip: BERWYN, PA 19312

Title: TD () Delete
Name: LUCAS, STEPHANIE
Address: 1041 OLD CASSATT RD
City-St-Zip: BERWYN, PA 19312

Title: CFO () Delete
Name: DESTEFANO, DAVID
Address: 1041 OLD CASSATT RD
City-St-Zip: BERWYN, PA 19312

Title: D (X) Delete
Name: KYLE, TERRY
Address: 1041 OLD CASSATT RD
City-St-Zip: BERWYN, PA 19312

Title: D (X) Delete
Name: TEERLINK, RICH
Address: 1041 OLD CASSATT RD
City-St-Zip: BERWYN, PA 19312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: DAVID DESTEFANO

CFO

04/29/2009

Electronic Signature of Signing Officer or Director

Date