

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004895

FILED  
Jan 04, 2011  
Secretary of State

Entity Name: BROOK LEDGE INC.

**Current Principal Place of Business:**

12 GOTWALS LANE  
OLEY, PA 19547

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 56  
OLEY, PA 19547

**New Mailing Address:**

12 GOTWALS LANE  
OLEY, PA 19547

FEI Number: 22-1591505

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

O'BRIEN, TERESA  
20244 MELVILLE ST  
ORLANDO, FL 32833 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: CP  
Name: GOTWALS, ROBERT S  
Address: BOX 176, 831 RISING SUN RD  
City-St-Zip: SOUDERTON, OA 18964

Title: VCVF  
Name: GOTWALS, WILLIAM S  
Address: 343 HARLEYSVILLE PIKE  
City-St-Zip: SOUDERTON, PA 18964

Title: T  
Name: GOTWALS, WILLIAM S  
Address: 343 HARLEYSVILLE PIKE  
City-St-Zip: SOUDERTON, PA 18964

Title: D  
Name: GOTWALS, ROBERT BRENT  
Address: 827 RISING SUN RD  
City-St-Zip: TELFORD, PA 18969

Title: D  
Name: GOTWALS, BRADLEY H  
Address: 30 HISTORIC LANE  
City-St-Zip: OLEY, PA 19547

Title: S  
Name: RITTENHOUSE, DENNIS  
Address: 168 PLEASANT VALLEY RD  
City-St-Zip: EAST EARL, PA 17519

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: DENNIS RITTENHOUSE

S

01/04/2011

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

\_\_\_\_\_  
Date