

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000004849

Entity Name: SKILL SURVEY, INC.

FILED
Mar 14, 2011
Secretary of State

Current Principal Place of Business:

565 E SWEDESFORD ROAD STE 315
WAYNE, PA 19087

New Principal Place of Business:

Current Mailing Address:

PO BOX 60568
KING OF PRUSSIA, PA 19406

New Mailing Address:

FEI Number: 23-3083018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION 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: DAVISON, JEFFREY
Address: 565 E SWEDESFORD ROAD STE 315
City-St-Zip: WAYNE, PA 19087

Title: D
Name: GOODMAN, EDWIN
Address: 565 E SWEDESFORD ROAD STE 315
City-St-Zip: WAYNE, PA 19087

Title: D
Name: LAPASTA, DOUGLAS
Address: 565 E SWEDESFORD ROAD STE 315
City-St-Zip: WAYNE, PA 19087

Title: D
Name: KAUFMAN, MICHAEL
Address: 565 E SWEDESFORD ROAD STE 315
City-St-Zip: WAYNE, PA 19087

Title: DP
Name: BIXLER, RAY
Address: 565 E SWEDESFORD ROAD STE 315
City-St-Zip: WAYNE, PA 19087

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: MARK NOREK

VP

03/14/2011

Electronic Signature of Signing Officer or Director

Date