2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000000348

Entity Name: PENN INDEPENDENT CORPORATION

FILED Feb 15, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
420 S. YOF HATBORC	RK ROAD), PA 19040				
Current Mailing Address:			New Maili	New Mailing Address:	
420 S. YOF HATBORC	RK ROAD), PA 19040				
FEI Number:	23-1997046	FEI Number Applied For() FE	l Number Not Appl	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
		DRIVE - SUITE 4 US			
The above in the State		submits this statement for the purpo	se of changing it	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent				Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () LEAR, ROBER 3689 MARKHAI BENSALEM, PA	M DRIVE	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition COHEN, ROBERT 622 CHATSWORTH DRIVE AMBLER, PA 19002	
Title: Name: Address: City-St-Zip:	D () SALTZMAN, E. 3 WHITE BIRCI HORSHAM, PA	H LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SVT () WAKSMAN, JA 24 WEST ELIZ RICHBORO, PA	ABETH LANE	Title: Name: Address: City-St-Zip:	SVTD (X) Change () Addition WAKSMAN, JASON M 24 WEST ELIZABETH LANE RICHBORO, PA 18954	
Title: Name: Address: City-St-Zip:	VS () HEERIN, JAME 765 LULLWATE ATLANTA, GA	ER RD	Title: Name: Address: City-St-Zip:	VSD (X) Change () Addition HEERIN, JAMES E JR 765 LULLWATER RD ATLANTA, GA 30307	
Title: Name: Address: City-St-Zip:	V () LEVY, EDWAR 257 STANFORI NEWTOWN, PA	PLACE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition MARCH, RICHARD S 420 S. YORK ROAD HATBORO, PA 19040	
Title: Name: Address: City-St-Zip:	AS () MILLER, FRAN 910 TENNIS AV ARDSLEY, PA	Œ	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JASON M. WAKSMAN SVTD 02/15/2006