

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F95000001262

FILED
Mar 11, 2003
Secretary of State

Entity Name: NATIONAL ACTUARIAL CONSULTANTS, LTD., INCORPORATED

Current Principal Place of Business:

715 TWINING RD
SUITE 202
DRESHER, PA 19025 US

New Principal Place of Business:

Current Mailing Address:

715 TWINING RD
SUITE 202
DRESHER, PA 19025 US

New Mailing Address:

FEI Number: 23-2299957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTGOMERY, BRUCE B
9040 SPRING RUN BLVD. #410
BONITA SPRINGS, FL 34135 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: P () Delete
Name: PEULER, MICHAEL H
Address: 237 BLACKBERRY DR.
City-St-Zip: EPHRATA, PA 17522

Title: V () Delete
Name: WALKER, JAMES J
Address: 6 VALLEY DR.
City-St-Zip: BIRDSBORO, PA 19508

Title: S () Delete
Name: KLEAVER, DIANA
Address: 777 TYSON AVE.
City-St-Zip: ARDSLEY, PA 19038

Title: T () Delete
Name: WEXLER, BRAD D
Address: 234 WINDSOR WAY
City-St-Zip: DOYLESTOWN, PA 18901

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DIANA KLEAVER

S

03/11/2003

Electronic Signature of Signing Officer or Director

Date