2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000122587

Entity Name: WESTON TO CORP.

City-St-Zip:

Title:

Name:

Address: City-St-Zip: () Delete

C/O 103 FOULK RD., STE 202

WILMINGTON, DE 19803 US

STAWIKEY, MARY S

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1675 MARKET ST. SUITE 207 WESTON, FL 33326 **New Mailing Address: Current Mailing Address:** 1400 N. PROVIDENCE RD. BLDG. 1, SUITE 415 MEDIA, PA 19063 FEI Number: 11-3663479 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BELMONT INVESTMENT CORP 1675 MARKET ST SUITE 207 WESTON, FL 33326 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSTD () Delete Title: (X) Change () Addition BELMONT, BARRY J Name: Name: BELMONT, BARRY J 600 HAVERFORD ROAD, SUITE G101 1400 N. PROVIDENCE RD., BLDG. 1, SUITE 415 Address: Address: City-St-Zip: HAVERFORD, PA 19041 City-St-Zip: MEDIA, PA 19063 Title: VD Title: VPD () Delete (X) Change () Addition Name: MARDINLY, PETER A ESQ. Name: MARDINLY, PETER A ESQ. 600 HAVERFORD ROAD, SUITE G101 1400 N. PROVIDENCE RD., BLDG. 1, SUITE 415 Address: Address: MEDIA, PA 19063 US HAVERFORD, PA 19041 US

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

VΡ SIGNATURE: PETER A. MARDINLY 04/24/2009

() Change () Addition