2002 UNIFORM BUSINESS REPORT (UBR)

Feb 01, 2002 8:00 am P11153 DOCUMENT # Secretary of State 1. Entity Name 02-01-2002 90022 021 ***150 INDUSTRIAL SYSTEMS ASSOCIATES, INC. Mailing Address Principal Place of Business 3220 TILLMAN DR 3220 TILLMAN DR 200 200 BENSALEM PA 19020 BENSALEM PA 19020 HS 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 23-1737774 Not Applicable \$8.75 Additional Country Zip Country Zip \Box 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 8. 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. PCEO VC00 Delete TITLE TITLE Ronald Whitater HOGAN, ANDREA NAME NAME BazoTillman Orive, Suite 200 1040 BRIDGETOWN PARK STREET ADDRESS STREET ADDRESS Bensalom PA 19010 VP CFO, COO, Secretary CITY-ST-ZIP LANGHORNE PA CITY-ST-ZIP Change TITLE **PCFO** X Delete TITLE michael Bonner NAME NAME SERGEY, JOHN M 3220 Tillman Orive Suit 200 STREET ADDRESS STREET ADDRESS 3220 TILLMAN DR, STE 200 Bensalom PA 19020 CITY-ST-ZIP CITY-ST-ZIP BENSALEM PA 19020 ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME COURTRIGHT, DAVID NAME STREET ADDRESS STREET ADDRESS 3220 TILLMAN DR, STE 200 CITY-ST-ZIP CITY-ST-7IP BENSALEM PA 19020 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME KRAUTER, GEORGE E NAME STREET ADDRESS 200 ROCKSVILLE RD STREET ADDRESS CITY-ST-ZIP **HOLLAND PA** CITY-ST-ZIP onector Addition Change TITLE AS X Delete TITLE Joshua Polan 475 SteamSout Road NAME MAHONE, WJITAM L NAME STREET ADDRESS STREET ADDRESS 475 STEAMBOAT RD CITY-ST-ZIP **GREENWICH CT 06830** Grecowich, CT CITY-ST-ZIP Chairnan Andrew Bursky Change 😾 Addition **PCEO** TITLE TITLE Delete WHITAKER, RON NAME NAME 475 Steamboat Road 3220 TILLMAN DR SUITE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BENSALEM PA 19020 Greenwich, CT 06830 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/02

FILED

Daytime Phone #