

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34463

FILED
Jan 06, 2004
Secretary of State

Entity Name: ROBERT E. LAMB, INC.

Current Principal Place of Business:

P. O. BOX 821
VALLEY FORGE, PA 19482

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 821
VALLEY FORGE, PA 19482

New Mailing Address:

FEI Number: 23-0783771 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: VREELAND, PETER G
Address: 1713 PALAMINO DR
City-St-Zip: WARRINGTON, PA 18976

Title: VPSD () Delete
Name: PAULINE, ALFRED R
Address: 2339 TURNBURY ROAD
City-St-Zip: GILBERTSVILLE, PA

Title: PTD () Delete
Name: STERCHAK, JOSEPH M
Address: 3717 WORTHINGTON RD
City-St-Zip: COLLEGEVILLE, PA

Title: VD () Delete
Name: PETERMAN, JOHN J
Address: 1411 NECTAR LANE
City-St-Zip: WEST CHESTER, PA

Title: VP () Delete
Name: SHATT, JOSEPH A
Address: 1306 E BUTLER PIKE
City-St-Zip: AMBLER, PA

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: THEODORE, E. MICHAEL
Address: 2038 VALLEY VIEW WAY
City-St-Zip: LANSDALE, PA 19446

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: JOSEPH M. STERCHAK

PRES

01/06/2004

Electronic Signature of Signing Officer or Director

_____ Date