2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000076476

Entity Name: WESTCHESTER SPECIALTY SERVICES, INC.

FILED Mar 28, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
204 S. MONROE ST. TALLAHASSE, FL 32301					
Current Mailing Address:			New Mailing Address:		
436 WALNUT STREET TAX DEPT. WB12A PHILADELPHIA, PA 19106					
FEI Number: (58-2430509	FEI Number Applied For () FEI Num	nber Not Applic	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 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: Name: Address: City-St-Zip:	D () I MCDONNELL, FI 436 WALNUT ST PHILADELPHIA,	REET	Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	T () FURMAN, ANDR 436 WALNUT ST PHILADELPHIA,	REET	Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	S () I GIGANTI, CARM 436 WALNUT ST PHILADELPHIA,	REET	Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	PD () I GIBSON, PATRIO 436 WALNUT ST PHILADELPHIA,	REET	Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	VP () MCALEER, MAT 436 WALNUT ST PHILADELPHIA,	REET	Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	AS () I BUCKLEY, JOHN 436 WALNUT ST PHILADELPHIA,	REET	Title: Name: Address: City-St-Zip:	AS (X) TACCA, THERES 436 WALNUT ST PHILADELPHIA,	TREET

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.

SIGNATURE: THERESA M TACCA AS 03/28/2008