

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004864

Entity Name: EUREST SERVICES, INC.**Current Principal Place of Business:**1500 LIBERTY RIDGE DRIVE
SUITE 210
WAYNE, PA 19087**Current Mailing Address:**2400 YORKONT RD
C/O TAX DEPT
CHARLOTTE, NC 28217**FEI Number:** 20-1684939**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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**Officer/Director Detail :**

Title PRESIDENT
Name BARNETT, STEPHEN
Address 1500 LIBERTY RIDGE DRIVE
 SUITE 210
City-State-Zip: WAYNE PA 19087

Title SECRETARY & GENERAL COUNSEL
Name SHISLER, VICTORIA
Address 1500 LIBERTY RIDGE DRIVE
 SUITE 210
City-State-Zip: WAYNE PA 19087

Title EXE VP, DIRECTOR
Name BROWN, C PALMER
Address 2400 YORKMONT ROAD
City-State-Zip: CHARLOTTE NC 28217

Title ASST. SECRETARY
Name ROSSITCH, RICHARD
Address 2400 YORKMONT ROAD
City-State-Zip: CHARLOTTE NC 28217

Title ASST. SECRETARY
Name DELANO, DEBORAH
Address 2400 YORKONT RD
City-State-Zip: CHARLOTTE NC 28217

Title ASST. TREASURER
Name THOMAS, DANIEL
Address 2400 YORKONT RD
City-State-Zip: CHARLOTTE NC 28217

Title DIRECTOR, CFO AND CEO
Name MEREDITH, ADRIAN
Address 2400 YORKONT RD
City-State-Zip: CHARLOTTE NC 28217

Title EXE VICE PRESIDENT AND
 ASSISTANT SECRETARY
Name MCCONNELL, JENNIFER
Address 2400 YORKONT RD
City-State-Zip: CHARLOTTE NC 28217

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I hereby 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 all other like empowered.

SIGNATURE: C PALMER BROWN**EXE VICE PRESIDENT****04/23/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	ASSISTANT SECRETARY
Name	BELCHER, KRISTIN
Address	1500 LIBERTY RIDGE DRIVE SUITE 210
City-State-Zip:	WAYNE PA 19087