

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33550

Entity Name: KLINGSTUBBINS, INC.**Current Principal Place of Business:**155 N LAKE AVE
PASADENA, CA 91101**Current Mailing Address:**ATTN: TAX DEPARTMENT
P. O. BOX 7084
PASADENA, CA 91109-7084 US**FEI Number:** 23-1711665**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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:** TRISTAN EMRICH

04/26/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	T
Name	BERRYMAN, KEVIN C.
Address	155 N LAKE AVE
City-State-Zip:	PASADENA CA 91101
Title	ASSISTANT TREASURER
Name	HSU, ROBERT T
Address	LEVEL 6
City-State-Zip:	MELBOURNE 19103
Title	PRESIDENT, DIRECTOR
Name	REED, THOMAS E.
Address	2301 CHESTNUT STREET
City-State-Zip:	PENNSYLVANIA PA 19103
Title	DIRECTOR
Name	STEVENSON, MICHAEL
Address	333 FAYETTEVILLE STREET, SUITE 1100
City-State-Zip:	RALEIGH NC 27601

Title	S
Name	TYLER, MICHAEL R.
Address	155 N LAKE AVE
City-State-Zip:	PASADENA CA 91101
Title	MANAGING PRINCIPAL & DIRECTOR
Name	CASTNER, JOSEPH A.
Address	2301 CHESTNUT STREET
City-State-Zip:	PHILADELPHIA PA 19103
Title	VP, DIRECTOR
Name	NEILSON, JOHN D.
Address	2301 CHESTNUT STREET
City-State-Zip:	PHILADELPHIA PA 19103
Title	DIRECTOR
Name	LEONARD, PAUL L.
Address	2301 CHESTNUT STREET
City-State-Zip:	PHILADELPHIA PA 19103

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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: GEOFFREY SANDERS

ASSISTANT TREASURER 04/26/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ROBINSON, JR., JOHN E.
Address 2301 CHESTNUT STREET
City-State-Zip: PHILADELPHIA PA 19103

Title DIRECTOR
Name MAUTE, PAUL W
Address 2301 CHESTNUT STREET
 PHILADELPHIA
City-State-Zip: PHILADELPHIA PA 19103

Title ASSISTANT TREASURER
Name SANDERS, GEOFFREY
Address 155 NORTH LAKE AVENUE
City-State-Zip: PASADENA CA 91101

Title ASSISTANT TREASURER
Name SANDERS, GEOFFREY
Address 155 NORTH LAKE AVENUE
City-State-Zip: PASADENA CA 91101

Title ASSISTANT SECRETARY
Name LIMBAUGH, JOHN
Address 501 N. BROADWAY
City-State-Zip: ST. LOUIS MO 63102