

No. C 108784	Due no later than Dec 31, 2011 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA			
	MONARCH RECOVERY MANAGEMENT, INC. PAT MCSORLEY 10965 DECATUR ROAD PHILADELPHIA PA 19154-3210 USA		3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
TREASURER	DIANE MAZZACANO	10965 DECATUR RD.	PHILADELPHIA	PA	USA	19154
DIRECTOR	WILLIAM J FULLER	10965 DECATUR RD.	PHILADELPHIA	PA	USA	19154
PRESIDENT	WILLIAM FULLER	10965 DECATUR RD.	PHILADELPHIA	PA	USA	19154
SECRETARY	SHARON M TARALLO	10965 DECATUR RD.	PHILADELPHIA	PA	USA	19154
5. Organized Under the Laws of: PA C 108784	6. Annual Report must be signed.*					
		Signature: William Fuller	Date: 11/30/2011			
		Name (type or print): William Fuller	Title: President			
Processed 11/30/2011		* Electronically provided signatures are accepted as original signatures.				