

**2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 810952

**FILED**  
**Mar 30, 2016**  
**Secretary of State**  
**CC7235558441**

**Entity Name:** EASTERN NATIONAL, CORPORATION

**Current Principal Place of Business:**

470 MARYLAND DRIVE  
SUITE 1  
FORT WASHINGTON, PA 19034

**Current Mailing Address:**

470 MARYLAND DRIVE  
SUITE 1  
FORT WASHINGTON, PA 19034 US

**FEI Number:** 23-1401703

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title SECRETARY, TREASURER, VICE  
CHAIR/ CEO  
Name MINNUCCI, GEORGE  
Address 470 MARYLAND DRIVE  
SUITE 1  
City-State-Zip: FORT WASHINGTON PA 19034

Title CFO  
Name WHITE, HEIDI A  
Address 470 MARYLAND DRIVE  
SUITE 1  
City-State-Zip: FORT WASHINGTON PA 19034

Title DIRECTOR  
Name GABRYS, GERARD  
Address 470 MARYLAND DRIVE  
SUITE 1  
City-State-Zip: FORT WASHINGTON PA 19034

Title DIRECTOR  
Name GOGUE, G JAY  
Address 470 MARYLAND DRIVE  
SUITE 1  
City-State-Zip: FORT WASHINGTON PA 19034

Title DIRECTOR  
Name ROCHON, GILBERT L.  
Address 470 MARYLAND DRIVE  
SUITE 1  
City-State-Zip: FORT WASHINGTON PA 19034

Title DIRECTOR  
Name SOUKUP, MICHAEL  
Address 470 MARYLAND DRIVE  
SUITE 1  
City-State-Zip: FORT WASHINGTON PA 19034

Title DIRECTOR  
Name WALKER, MICHAEL  
Address 470 MARYLAND DRIVE  
SUITE 1  
City-State-Zip: FORT WASHINGTON PA 19034

Title DIRECTOR  
Name YANDELA, DEB  
Address 470 MARYLAND DRIVE  
SUITE 1  
City-State-Zip: FORT WASHINGTON PA 19034

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** HEIDI A WHITE

**CFO**

**03/30/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date