#### 2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 810952** 

Entity Name: EASTERN NATIONAL, CORPORATION

Apr 01, 2019 **Secretary of State** 6377724189CC

**FILED** 

## **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 **DIRECTOR** Title DIRECTOR Name CLARK, KEVIN Name GOGUE, G JAY

Address 470 MARYLAND DRIVE Address 470 MARYLAND DRIVE

SUITE 1

SUITE 1

FORT WASHINGTON PA 19034 FORT WASHINGTON PA 19034 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title **PRESIDENT** 

HARMON, DAVID KISSLING, KEVIN Name Name

470 MARYLAND DRIVE 470 MARYLAND DRIVE Address Address

> SUITE 1 SUITE 1

FORT WASHINGTON PA 19034 FORT WASHINGTON PA 19034 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title **DIRECTOR** 

MINNUCCI, GEORGE PERRY, HARVEY C. Name Name

470 MARYLAND DRIVE 470 MARYLAND DRIVE Address Address

SUITE 1 SUITE 1

FORT WASHINGTON PA 19034 FORT WASHINGTON PA 19034 City-State-Zip: City-State-Zip:

Title SECRETARY, TREASURER Title **DIRECTOR** 

RYAN, JOHN F. Name Name SCHULTZ, DUSTY

Address 470 MARYLAND DRIVE 470 MARYLAND DRIVE Address

SUITE 1 SUITE 1

FORT WASHINGTON PA 19034 City-State-Zip: FORT WASHINGTON PA 19034 City-State-Zip:

#### Continues on page 2

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.

04/01/2019 **CFO** SIGNATURE: HEIDI A. WHITE

# Officer/Director Detail Continued:

DIRECTOR CFO Title Title

WHITE, HEIDI A. WALKER, MICHAEL Name Name

Address 470 MARYLAND DRIVE Address 470 MARYLAND DRIVE SUITE 1

SUITE 1

City-State-Zip: FORT WASHINGTON PA 19034 City-State-Zip: FORT WASHINGTON PA 19034