

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002514

Entity Name: SCIBAL ASSOCIATES, INC.**Current Principal Place of Business:**100 DECADON DRIVE
EGG HARBOR TOWNSHIP, NJ 08234**Current Mailing Address:**100 DECADON DRIVE
EGG HARBOR TOWNSHIP, NJ 08234 US**FEI Number:** 22-2483867**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AVOLIO, ROBERT P
AVOLIO & HANLON, P.C.
2730 U.S. #1 SOUTH STE. J
ST. AUGUSTINE, FL 32086 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 CHAIRMAN
Name CATINO, ANNETTE
Address 30 KNIGHTSBRIDGE ROAD
City-State-Zip: PISCATAWAY NJ 08854

Title PRESIDENT & CEO
Name NOBLE, ANN L
Address 100 DECADON DRIVE
City-State-Zip: EGG HARBOR TOWNSHIP NJ 08234

Title CFO
Name JANET , BUGGLE CFO
Address 30 KNIGHTSBRIDGE ROAD
City-State-Zip: PISCATAWAY NJ 08854

Title SECRETARY
Name MARY, PAPANDREA V
Address 30 KNIGHTSBRIDGE ROAD
City-State-Zip: PISCATAWAY NJ 08854

Title DIRECTOR
Name SCIBAL, DAVID A
Address 23 MAYS LANDING ROAD
SUITE ONE
City-State-Zip: SOMERS POINT NJ 08244

Title DIRECTOR
Name BUTTACI, NORMAN V
Address 6 LOCKE COURT
City-State-Zip: WEST TRENTON NJ 08628

Title DIRECTOR
Name GRYWALSKI, JOHN J
Address 919 JF KENNEDY BOULEVARD
City-State-Zip: BAYONNE NJ 07002

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: ANN L. NOBLE

PRESIDENT & CEO

04/18/2014

Electronic Signature of Signing Officer/Director Detail

Date