

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006434

FILED  
May 17, 2007  
Secretary of State

Entity Name: ROCKWOOD PROGRAMS, INC.

**Current Principal Place of Business:**

4001 MILLER ROAD  
WILMINGTON, DE 198021999 US

**New Principal Place of Business:**

**Current Mailing Address:**

4001 MILLER ROAD  
WILMINGTON, DE 198021999 US

**New Mailing Address:**

FEI Number: 74-2760840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

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

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CLARK, GLENN W  
Address: 880 WEST MINER ST  
City-St-Zip: WEST CHESTER, PA 19382 US

Title: S ( ) Delete  
Name: CLARK, DAWNE  
Address: 880 WEST MINER ST  
City-St-Zip: WEST CHESTER, PA 19382 US

Title: DVP ( ) Delete  
Name: HUVER, FRANCIS J  
Address: 4663 MAIDEN DRIVE  
City-St-Zip: WILMINGTON, DE 19803 US

Title: D ( ) Delete  
Name: MCCALLIN, DARRYL A  
Address: 16 FARMINGTON CIRCLE  
City-St-Zip: WEST GROVE, PA 19390 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FRANCIS J HUVER

DVP

05/17/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date