

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000002147

FILED
Apr 18, 2012
Secretary of State

Entity Name: MET-PRO CORPORATION

Current Principal Place of Business:

160 CASSELL RD
HARLEYSVILLE, PA 19438

New Principal Place of Business:

Current Mailing Address:

160 CASSELL RD
HARLEYSVILLE, PA 19438

New Mailing Address:

FEI Number: 23-1683282 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD STE 508
MIAMI, FL 33156 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

OFFICERS AND DIRECTORS:

Title: CEO
Name: DE HONT, RAYMOND J
Address: 160 CASSELL RD
City-St-Zip: HARLEYSVILLE, PA 19438

Title: CFO
Name: MURPHY, NEAL E
Address: 160 CASSELL RD
City-St-Zip: HARLEYSVILLE, PA 19438

Title: D
Name: GLATFELTER, GEORGE H II
Address: 160 CASSELL RD
City-St-Zip: HARLEYSVILLE, PA 19438

Title: D
Name: MORRIS, MICHAEL J
Address: 160 CASSELL RD
City-St-Zip: HARLEYSVILLE, PA 19438

Title: D
Name: SILVERMAN, STANLEY W
Address: 160 CASSELL RD
City-St-Zip: HARLEYSVILLE, PA 19438

Title: D
Name: SPIRES, JUDITH A
Address: 160 CASSELL RD
City-St-Zip: HARLEYSVILLE, PA 19438

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: NEAL E MURPHY

CFO

04/18/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date