



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 138817		2. Name of Corporation PFMAM, Inc.		
3. Street Address Principal Business Office Two Logan Square, #1600		City Philadelphia	State PA	Zip 19103
4. Business Phone No. 215-567-6100		5. State of Incorporation Pennsylvania		
6. Brief Description of the Character of Business Conducted in Rhode Island Public Investment Advisors				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Martin Margolis		Vice President Name N/A		
Street Address One Keystone Plaza, #300		Street Address		
City Harrisburg	State Pa	Zip 17101	City	State
Secretary Name Debra Goodnight		Treasurer Name Steve Boyle		
Street Address One Keystone Plaza, #300		Street Address Two Logan Square, #1600		
City Harrisburg	State PA	Zip 17101	City Philadelphia	State PA
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
AUTHORIZED SHARES		ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
100 COMM \$10.00 Par Value			100	Common
				\$10.00/ share

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED	
File Date	JAN 25 2008
Check No.	By DS 1424
By:	
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature: Stephen Boyle Date: 1/16/08
Print or Type Name: Stephen Boyle
Title: Asst Secy Treasurer