

1.) CORPORATION NAME:

**TD Wealth Management Services Inc.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI  
CORPORATION SERVICE COMPANY  
11 S 12TH ST  
PO BOX 1463**

**RICHMOND, VA 23218**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**PA**

DUE DATE: **3/31/2011**

SCC ID NO: **F1661836**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2005 MARKET ST STE 200  
ONE COMMERCE SQUARE

CITY/ST/ZIP: PHILADELPHIA, PA 19103-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: LYDIA MCILWAIN  
TITLE: ASST SECRETARY  
ADDRESS: 75 JOHN ROBERTS ROAD  
BUILDING A  
CITY/ST/ZIP/CO: SOUTH PORTLAND, ME 04106-

OFFICER

DIRECTOR

NAME: F. JAY MEYER  
TITLE: SECRETARY  
ADDRESS: 2005 MARKET STREET # 200  
ONE COMMERCE SQUARE  
CITY/ST/ZIP/CO: PHILADELPHIA, PA 19103-

OFFICER

DIRECTOR

NAME: ALYSON KLUG  
TITLE: PRESIDENT  
ADDRESS: 2005 MARKET STREET # 200  
ONE COMMERCE SQUARE  
CITY/ST/ZIP/CO: PHILADELPHIA, PA 19103-

OFFICER

DIRECTOR

NAME: PAUL J. MASTERSON  
TITLE: TREASURER  
ADDRESS: 2005 MARKET STREET # 200  
ONE COMMERCE SQUARE  
CITY/ST/ZIP/CO: PHILADELPHIA, PA 19103-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID BOONE DIRECTOR 2005 MARKET STREET # 200 ONE COMMERCE SQUARE PHILADELPHIA, PA 19103-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFF HENDERSON DIRECTOR 2005 MARKET STREET # 200 ONE COMMERCE SQUARE PHILADELPHIA, PA 19103-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALYSON KLUG DIRECTOR 2005 MARKET STREET # 200 ONE COMMERCE SQUARE PHILADELPHIA, PA 19103-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL J. MASTERSON DIRECTOR 2005 MARKET STREET # 200 ONE COMMERCE SQUARE PHILADELPHIA, PA 19103-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUZANNE POOLE DIRECTOR 2005 MARKET STREET # 200 ONE COMMERCE SQUARE PHILADELPHIA, PA 19103-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH FICO DIRECTOR 2005 MARKET STREET # 200 ONE COMMERCE SQUARE PHILADELPHIA, PA 19103-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ LYDIA MCILWAIN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	LYDIA MCILWAIN, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	3/1/2011 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			