

1.) CORPORATION NAME:

**Berger Group Holdings, Inc.**

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
BANK OF AMERICA CENTER 16TH FL  
1111 EAST MAIN STREET**

SCC ID NO: **F1870312**

**RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	200,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 412 MT KEMBLE AVE

CITY/ST/ZIP: MORRISTOWN, NJ 07960

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:	NICHOLAS J MASUCCI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	412 MOUNT KEMBLE AVENUE		
CITY/ST/ZIP/CO:	MORRISTOWN, NJ 07960		

NAME:	LUKE MCKINNON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO/VP		
ADDRESS:	412 MOUNT KEMBLE AVENUE		
CITY/ST/ZIP/CO:	MORRISTOWN, NJ 07960		

NAME:	MICHAEL REAP	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY/VP		
ADDRESS:	412 MOUNT KEMBLE AVENUE		
CITY/ST/ZIP/CO:	MORRISTOWN, NJ 07960		

NAME:	FREDRIC S BERGER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1250 23RD ST NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20037		

NAME:	FABRICE SIGNOR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	55 BIS QUAI DE GRENELLE		
CITY/ST/ZIP/CO:	PARIS, 75015, FR		

NAME:	WAYNE J OVERMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	COO/VP		
ADDRESS:	412 MOUNT KEMBLE AVENUE		
CITY/ST/ZIP/CO:	MORRISTOWN, NJ 07960		

NAME: TOM NICASTRO TITLE: CHIEF ETHICS/VP ADDRESS: 1250 23RD ST, NW CITY/ST/ZIP/CO: WASHINGTON, DC 20037	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: GERARD SCHWARTZ TITLE: DIRECTOR ADDRESS: 10 DEERFIELD RD CITY/ST/ZIP/CO: ST. LOUIS, MO 63124	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: ERNEST A PORTFORS TITLE: DIRECTOR ADDRESS: 2955 VIRTUAL WAY, SUITE 500 CITY/ST/ZIP/CO: VANCOUVER, V5M 4X6, CA	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: THEODORE M ARMSTRONG TITLE: DIRECTOR ADDRESS: 7730 CARONDELET, SUITE 103 CITY/ST/ZIP/CO: ST. LOUIS, MO 63105	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: GERALD D WOODWARD TITLE: ASST SECRETARY ADDRESS: 412 MOUNT KEMBLE AVE CITY/ST/ZIP/CO: MORRISTOWN, VA 07960	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: MARK SADOWSKI TITLE: ASST SECRETARY ADDRESS: 1250 23RD ST, NW CITY/ST/ZIP/CO: WASHINGTON, DC 20037	<input checked="" type="checkbox"/> OFFICER <input 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/ NICHOLAS J MASUCCI SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	NICHOLAS J MASUCCI, PRES/CEO PRINTED NAME AND CORPORATE TITLE
8/29/2013 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.	