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Pennsylvania Annual Report Client Information Form

This form is designed to collect the necessary information for JPS Business Solutions, LLC to prepare and file your Pennsylvania Annual Report. Please complete all sections as accurately as possible. You will also find brief explanations of key roles and terms.

Section 1 – Business Entity Information

Legal Business Name: _____

Entity Type: ◯ LLC ◯ Corporation PA Entity Number (if known): _____

Date of Incorporation/Formation: _____

Section 2 – Registered Office Address

Street Address: _____

City: _____ State: _____ Zip: _____

Section 3 – Officers / Members / Managers

• Officer: A person holding a formal position within a corporation such as President, Treasurer, or Secretary.

• Member: An owner of a Limited Liability Company (LLC).

• Manager: An individual appointed to manage the affairs of an LLC if it is manager-managed.

Officer/Member/Manager Name: _____

Title: _____

Address: _____
(Provide additional in notes below.)

Section 4 – Authorized Signer

The individual who has authority to legally sign documents on behalf of the business.

Name: _____

Title: _____

Email: _____

Phone: _____

Section 5 – Authorization to File

By signing below, I authorize JPS Business Solutions, LLC to prepare and file the Pennsylvania Annual Report on behalf of the above-named entity. I affirm that the information provided in this form is true and correct to the best of my knowledge.

Section 6 – Certification

Signature: _____ Date: _____

Printed Name: _____ Title: _____

Important: Upon completion of this form, please send it via email to kalley.lackey@jps-pa.com

Payment MUST be made prior to **9/27/25** in order to meet deadline. Follow the link or QR code below.

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