

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001053

FILED
May 01, 2009
Secretary of State

Entity Name: BARCLAYS SERVICES CORPORATION

Current Principal Place of Business:

200 PARK AVE
NEW YORK, NY 10166

New Principal Place of Business:

Current Mailing Address:

200 PARK AVENUE
LEGAL DEPARTMENT
NEW YORK, NY 10166

New Mailing Address:

FEI Number: 13-3714398 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEOD () Delete
Name: WESTWOOD, JAI
Address: 200 CEDAR KNOLLS ROAD
City-St-Zip: WHIPPANY, NJ 07981

Title: S () Delete
Name: KAPLAN, ALAN B
Address: 200 PARK AVE
City-St-Zip: NEW YORK, NY 10166

Title: V () Delete
Name: BYRNE, MARY
Address: 200 CEDAR KNOLLS ROAD
City-St-Zip: WHIPPANY, NJ 07981

Title: CFOD () Delete
Name: WALKER, JAMES
Address: 200 PARK AVE
City-St-Zip: NEW YORK, NY 10166

Title: COBD () Delete
Name: LAROCCA, GERARD
Address: 200 PARK AVE
City-St-Zip: NEW YORK, NY 10166

Title: AS () Delete
Name: BLECHINGER, TONYA
Address: 4837 WATT AVENUE
City-St-Zip: NORTH HIGHLANDS, CA 95660

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFOD (X) Change () Addition
Name: KELLY, MARTIN
Address: 200 PARK AVE
City-St-Zip: NEW YORK, NY 10166

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS (X) Change () Addition
Name: WEINER, JESSICA
Address: 200 PARK AVE.
City-St-Zip: NEW YORK, NY 10166

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JESSICA WEINER

AS

05/01/2009

Electronic Signature of Signing Officer or Director

Date