

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26438

FILED
Apr 05, 2007
Secretary of State

Entity Name: LCI HOLDINGS, INC.

Current Principal Place of Business:

ONE CLAIBORNE AVE
ATTN: TAX DEPT., 8TH FLOOR
N BERGEN, NJ 07047

New Principal Place of Business:

Current Mailing Address:

ONE CLAIBORNE AVE
ATTN: TAX DEPT., 8TH FLOOR
N BERGEN, NJ 07047

New Mailing Address:

FEI Number: 13-3423562 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CCEO () Delete
Name: CHARRON, PAUL R
Address: 70 OX RIDGE LANE
City-St-Zip: DARIEN, CT 06820

Title: P () Delete
Name: NEGRON, ROBERT
Address: 334 CEDAR LANE
City-St-Zip: RIVER VALE, NJ 07642

Title: VPCF () Delete
Name: SCARPA, MICHAEL
Address: ONE CLAIBORNE AVE
City-St-Zip: NORTH BERGEN, NJ 07047

Title: VPCA () Delete
Name: KARP, ROBERTA S
Address: 336 WEST END AVENUE
City-St-Zip: NEW YORK, NY 10023

Title: VPCR () Delete
Name: MCKEAN, ROBERT
Address: 15 SHERWOOD STREET
City-St-Zip: HUNTINGTON, NY 11743

Title: VPDG () Delete
Name: KEURIAN, LORI R
Address: 12-26 DIANE PLACE
City-St-Zip: BAYSIDE, NY 11360

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:

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Address:
City-St-Zip:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: KEVIN M. BOLLBACH

VP

04/05/2007

Electronic Signature of Signing Officer or Director

_____ Date