

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32981

Entity Name: LEBHAR-FRIEDMAN, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

425 PARK AVENUE
NEW YORK, NY 10022

New Principal Place of Business:

Current Mailing Address:

425 PARK AVENUE
NEW YORK, NY 10022

New Mailing Address:

FEI Number: 13-5625619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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: PCD () Delete
Name: FRIEDMAN, J. ROGER,
Address: 425 PARK AVENUE
City-St-Zip: NEW YORK, NY

Title: D () Delete
Name: WILLMOTT, PETER
Address: 919 N MICHIGAN AVENUE, SUITE 1220
City-St-Zip: CHICAGO, IL 60611

Title: D () Delete
Name: KELLY, JAMES,
Address: 425 PARK AVENUE
City-St-Zip: NEW YORK, NY

Title: D () Delete
Name: BARLETTA, JOSEPH,
Address: 425 PARK AVENUE
City-St-Zip: NEW YORK, NY

Title: VT () Delete
Name: MILLS, DANIEL
Address: 425 PARK AVENUE
City-St-Zip: NEW YORK, NY

Title: D () Delete
Name: HILDES, DAVID
Address: 8 OLDE WOODS LANE
City-St-Zip: WOODCLIFF LAKES, NJ 07675

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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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 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: DANIEL MILLS

VT

04/27/2007

Electronic Signature of Signing Officer or Director

Date