2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005556

Entity Name: THE LOUIS BERGER GROUP (DOMESTIC), INC.

FILED Mar 10, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
412 MOUNT KEMBLE AVE. MORRISTOWN, NJ 07960							
Current Mailing Address:				New Mailing Address:			
412 MOUNT KEMBLE AVE. MORRISTOWN, NJ 07960			412 MOUNT KEMBLE AVE. PO BOX 1946 MORRISTOWN, NJ 07962				
FEI Number: 22-1966254 FEI Number Applied For () FEI Number			nber Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							tered Agent:
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US							
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:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D ()E BACH, JAMES G 412 MOUNT KEM MORRISTOWN, I			Title: Name: Address: City-St-Zip:	PD (X BACH, JAMES 412 MOUNT KE MORRISTOWN	EMBLE AVE	Addition
Title: Name: Address: City-St-Zip:	C () E WOLFF, DERISH 412 MOUNT KEM MORRISTOWN, I	IBLE AVE		Title: Name: Address: City-St-Zip:	CS (X BERGER, FRE 2445 M STREE WASHINGTON	T, NW	Addition
Title: Name: Address: City-St-Zip:	TAS ()E PEPE, SALVATO 412 MOUNT KEN MORRISTOWN, I	IBLE AVE		Title: Name: Address: City-St-Zip:	()) Change()	Addition
Title: Name: Address: City-St-Zip:	PD () E MASUCCI, NICHO 412 MOUNT KEM MORRISTOWN, I	DLAS J IBLE AVE		Title: Name: Address: City-St-Zip:	D (X MASUCCI, NIC 412 MOUNT KE MORRISTOWN	EMBLE AVE	Addition
Title: Name: Address: City-St-Zip:	S () E BERGER, FREDI 2445 M SREET, I WASHINGTON, E	VVV		Title: Name: Address: City-St-Zip:	D (X STAMATIS, D J 412 MOUNT KE MORRISTOWN	EMBLE AVE	Addition
Title: Name: Address: City-St-Zip:	D (X) E STAMATIS, D. JA 412 MOUNT KEM MORRISTOWN, I	IBLE AVE		Title: Name: Address: City-St-Zip:	()) Change()	Addition

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: SALVATORE J. PEPE TAS 03/10/2009