

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006175

FILED  
Jan 11, 2010  
Secretary of State

**Entity Name:** FEDEX OFFICE AND PRINT SERVICES, INC.

**Current Principal Place of Business:**

THREE GALLERIA TOWER, 13155 NOEL RD.  
STE. 1600  
DALLAS, TX 75240 US

**New Principal Place of Business:**

**Current Mailing Address:**

THREE GALLERIA TOWER, 13155 NOEL RD.  
STE. 1600  
DALLAS, TX 75240 US

**New Mailing Address:**

**FEI Number:** 77-0433330

**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:** P  
**Name:** PHILIPS, BRIAN  
**Address:** 3 GALLERIA TWR. 13155 NOEL RD. STE 1600  
**City-St-Zip:** DALLAS, TX 75240 US

**Title:** S  
**Name:** MOLINET, ROBERT  
**Address:** 942 SHADY GROVE RD  
**City-St-Zip:** MEMPHIS, TN 38120 US

**Title:** D  
**Name:** SMITH, FREDERICK  
**Address:** 942 SHADY GROVE RD  
**City-St-Zip:** MEMPHIS, TN 38120 US

**Title:** V  
**Name:** BENNERS, LESLIE  
**Address:** 13155 NOEL RD STE 1600  
**City-St-Zip:** DALLAS, TX 75240 US

**Title:** D  
**Name:** CARTER, ROBERT  
**Address:** 942 SHADY GROVE RD  
**City-St-Zip:** MEMPHIS, TN 38120 US

**Title:** T  
**Name:** SCHWANS, DAVID  
**Address:** 3 GALLERIA TWR 13155 NOEL ROAD STE 1600  
**City-St-Zip:** DALLAS, TX 75240 US

I hereby 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 all other like empowered.

**SIGNATURE:** DAVID SCHWANS

T

01/11/2010

Electronic Signature of Signing Officer or Director

Date