2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836463

Entity Name: HPSC, INC.

FILED Apr 18, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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60 STATE ST. 35TH FL ONE BEACON ST., 2ND FLOOR

TAX DEPT TAX DEPT

BOSTON, MA 021091803 US BOSTON, MA 021083106 US

Current Mailing Address: New Mailing Address:

60 STATE ST. 35TH FL ONE BEACON ST., 2ND FLOOR

TAX DEPT TAX DEPT POSTON MA 031001903 US

BOSTON, MA 021091803 US BOSTON, MA 021083106 US

FEI Number: 04-2560004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: () Delete Title: (X) Change () Addition DILIACOMO, ANTHONY CARRASQUILLO, CARLOS R Name: Name: 500 WES MONROE 500 WEST MONROE ST Address: Address: City-St-Zip: CHICAGO, IL 60661 City-St-Zip: CHICAGO, IL 60661

Title: Title: () Delete (X) Change () Addition Name: DOHERTY, RAYMOND R., Name: KALLIOMAA, CONNIE-JO W 242 CROSS STREET 2325 LAKEVIEW PKWY, STE 700 Address: Address: BELMONT, MA ALPHARETTA, GA 300047921 City-St-Zip: City-St-Zip:

Title: V () Delete Title: V (X) Change () Addition

 Name:
 LEFEBVRE, RENE
 Name:
 LEFEBVRE, RENE

 Address:
 45 MELANIE LANE
 Address:
 ONE BEACO ST, 2ND FLOOR

City-St-Zip: WRENTHAM, MA City-St-Zip: BOSTON, MA 02108

Title: P () Delete Title: P (X) Change () Addition
Name: EVERETS, JOHN Name: EVERETS, JOHN W JR
Address: 72 CHESTNIJT ST Address: ONE BEACON ST 2ND FI

Address: 72 CHESTNUT ST. Address: ONE BEACON ST, 2ND FL
City-St-Zip: BOSTON, MA C2108-310

Title: D () Delete Title: D (X) Change () Addition Name: OLIVANS, W. LORDON Name: CAMERON, GREGORY

 Name:
 Cativals, W. Ecropsin
 Name:
 CAMILTON, GREGORY

 Address:
 500 WEST MONROE
 Address:
 500 WEST MONROE ST

 City-St-Zip:
 CHICAGO, IL 60661
 City-St-Zip:
 CHICAGO, IL 60661

Title: () Delete Title: (X) Change () Addition AMBROSE, JAMES CARRASQUILLO, CARLOS R Name: Name: 20225 WATER TOWER 500 WEST MONROE ST Address: Address: City-St-Zip: BROOKFIELD, WI 53045 City-St-Zip: CHICAGO, IL 60661

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CONNIE-JO W. KALLIOMAA AS 04/18/2005