2005 FOR PROFIT CORPORATION

Jan 19, 2005 8:00 am **ANNUAL REPORT Secretary of State DOCUMENT #856924** 01-19-2005 90008 004 ***150.00 J.P. MORGAN ELECTRONIC FINANCIAL SERVICES, INC. Principal Place of Business Mailing Address 8430 W. BRYN MAWR AVENUE C/O CT CORPORATION SYSTEM 50003740 8430 W. BRYN MAWR 8TH FLOOR 8TH FLOOR LEGAL DEPARTMENT CHICAGO, IL 60631 CHICAGO, IL 60631 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01052005 CR2E034 (10/03) Chq-P City & State City & State 4. FEI Number Applied For 13-6190676 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE Change Addition MARK, MACKENZIE NAME NAME STREET ADDRESS 8430 W BRYN MAWR AVE STREET ADDRESS CHICAGO, IL 60631 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MACKENZIE, MARK E NAME NAME STREET ADDRESS 8430 W BRYN MAWR AVE STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60631 CITY-ST-7IP VCFO Delete TITLE Change ☐ Addition TITLE SANECKI, JAMES NAME NAME STREET ADDRESS 8430 W BRYN MAWR AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP CHICAGO, IL 60631 TITLE Delete TITLE V.P. Assistant Secretary ☐ Change XX Addition VAS KIBBLE-SMITH, BRIAN NAME NAME Richard M. Gottlieb 8430 W BRYN MAWR AVE STREET ADDRESS STREET ADDRESS 1 Chase Manhattan Plaza CITY-ST-ZIP CHICAGO, IL 60631 CITY-ST-ZIP New York, NY 10081 ☐ Delete TITLE □ Change ☐ Addition TITLE NAME UNGER, PAUL NAME STREET ADDRESS 6700 CITICORP DR. STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33619 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME GUZZI, JOHN M NAME STREET ADDRESS 8430 W. BRYN MAWR AVE. STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental periods from a accurate and that my 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 tracks empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

SIGNATURE:

CHICAGO, IL 60631

CITY-ST-ZIP

John M. Guzzi, V.P. & Counsel

1/10/05

773-380-5175

Davtime Phone #

FILED