2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000517

Entity Name: O'BRIEN & GERE LIMITED INC.

FILED Apr 12, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
5000 BRITTONFIELD PARKWAY EAST SYRACUSE, NY 13057 US					
Current Mailing Address:			New Mailir	New Mailing Address:	
PO BOX 48 SYRACUSE	73 E, NY 13221	US			
FEI Number: 16-1284512		FEI Number Applied For () FEI Number Not Applicable () Certificate of Sta		icable () Certificate of Status Desired ()	
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: Name: Address: City-St-Zip:	CEOP () D BROWN, TERRY 605 BRIAR BROC FAYETTEVILLE, N	L OK RUN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () D JOHNSON, PETE 1512 NORTH BEE AMBLER, PA 190	R C ECHAM DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	ASSV () D SUTPHEN, JOHN 5100 BROCKWA' FAYETTEVILLE, N	F Y LANE	Title: Name: Address: City-St-Zip:	ASVP (X) Change () Addition SUTPHEN, JOHN F 5100 BROCKWAY LANE FAYETTEVILLE, NY 13066	
Title: Name: Address: City-St-Zip:	CFOV () D MCNULTY, JOSE 27-A BALL RD SYRACUSE, NY	PH M	Title: Name: Address: City-St-Zip:	CFOV (X) Change () Addition MCNULTY, JOSEPH M 315 STRATHMORE DRIVE SYRACUSE, NY 13207	
Title: Name: Address: City-St-Zip:	VP D () D FOX, JAMES A 3803 GRAY LEDO SYRACUSE, NY	GE TERRACE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP D () D ROLAND, STEVE 10 AURYANSEN O CLOSTER, NJ 07	N J COURT	Title: Name: Address: City-St-Zip:	()Change()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN F SUTPHEN VP 04/12/2007