2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: O'BRIEN & GERE LIMITED INC.

Current Principal Place of Business:

5000 BRITTONFIELD PARKWAY
EAST SYRACUSE, NY 13057 US

New Principal Place of Business:

333 W WASHINGTON ST
SYRACUSE, NY 13202 US

Current Mailing Address:

PO BOX 4873
SYRACUSE, NY 13221 US

New Mailing Address:

FEI Number: 16-1284512 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: D
Name: BROWN, TERRY L
Address: 605 BRIAR BROOK RUN
City-St-Zip: FAYETTEVILLE, NY 13066

Title: ASVP
Name: SUTPHEN, JOHN F
Address: 5100 BROCKWAY LANE
City-St-Zip: FAYETTEVILLE, NY 13066

Title: CFOD
Name: MCNULTY, JOSEPH M
Address: 315 STRATHMORE DRIVE
City-St-Zip: SYRACUSE, NY 13207

Title: CEOD
Name: FOX, JAMES A
Address: 3803 GRAY LEDGE TERRACE
City-St-Zip: SYRACUSE, NY 13215

Title: VP D
Name: ROLAND, STEVEN J
Address: 10 AURYANSEN COURT
City-St-Zip: CLOSTER, NJ 07624

Title: PR D
Name: DAVIS, R. LELAND
Address: 4601 WATERGAP, PO BOX 8
City-St-Zip: MANLIUS, NY 13104

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: JOHN F SUTPHEN AS 04/08/2011

Electronic Signature of Signing Officer or Director Date