

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006646

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: SILVERPLATTER INFORMATION, INC.

## Current Principal Place of Business:

100 RIVER RIDGE DR  
NORWOOD, MA 02062

## New Principal Place of Business:

## Current Mailing Address:

2700 LAKE COOK ROAD  
WKSU LEGAL  
RIVERWOODS, IL 60015

## New Mailing Address:

2700 LAKE COOK ROAD  
WKSU LEGAL DEPT  
RIVERWOODS, IL 60015

FEI Number: 04-2887102

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: D ( ) Delete  
Name: MCCAULEY, JEFFERY  
Address: 161 WASHINGTON STREET  
City-St-Zip: CONSHOHOCKEN, PA 19428

Title: S ( ) Delete  
Name: LENZ, BRUCE C  
Address: 2700 LAKE COOK ROAD  
City-St-Zip: RIVERWOODS, IL 60015

Title: VP ( ) Delete  
Name: GORDON, DALE C  
Address: 2700 LAKE COOK ROAD  
City-St-Zip: RIVERWOODS, IL 60015

Title: AT ( ) Delete  
Name: HEALY, PETER F  
Address: 2700 LAKE COOK ROAD  
City-St-Zip: RIVERWOODS, IL 60015

Title: DP ( ) Delete  
Name: FOSTER, GARY  
Address: 333 SEVENTH AVE.  
City-St-Zip: NEW YORK, NY 10001

Title: CFO ( ) Delete  
Name: HOLDER, LINDA  
Address: 333 SEVENTH AVE  
City-St-Zip: NEW YORK, NY 10011

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DP (X) Change ( ) Addition  
Name: ABRAMSON, KAREN  
Address: 333 SEVENTH AVE.  
City-St-Zip: NEW YORK, NY 10001

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DALE C GORDON

VP

04/12/2007

Electronic Signature of Signing Officer or Director

Date