2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002877

Address

Title:

Name:

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City-St-Zip:

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Entity Name: PRINTEGRA CORPORATION

FILED Apr 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 403 WESTPARK CT. STE A ONE CANTERBURY GREEN PEACHTREE CITY, GA 30269 201 BROAD STREET STAMFORD, CT 06901 **Current Mailing Address:** New Mailing Address: PO BOX 2347 ONE CANTERBURY GREEN 201 BROAD STREET PEACHTREE CITY, GA 30269 STAMFORD, CT 06901 FEI Number: 04-3672563 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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 CAMPBELL, CASEY T BURTON, SR., ROBERT G Name: Name: 403 WESTPARK CT., STE A ONE CANTERBURY GREEN Address: Address: City-St-Zip: PEACHTREE CITY, GA 30269 City-St-Zip: STAMFORD, CT 06901 Title: VPF Title: CFO (X) Change () Addition () Delete Name: REYNOLDS, DAVID S Name: HILTWEIN, MARK 403 WESTPARK CT., STE A ONE CANTERBURY GREEN Address: Address: PEACHTREE CITY, GA 30269 STAMFORD, CT 06901 City-St-Zip: City-St-Zip: Title: () Change (X) Addition Title: () Delete TRES LYNN, ROBERT Name: Name: ONE CANTERBURY GREEN

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

STAMFORD, CT 06901

STAMFORD, CT 06901

ONE CANTERBURY GREEN

DAVIS, TIMOTHY M

() Change (X) Addition

SEC

SIGNATURE: ROBERT LYNN 04/09/2008 **TRES**