## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000005363

Entity Name: MSRA HOLDINGS, INC.

FILED Apr 28, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8659 BAYPINE ROAD, SUITE 300 245 PARK AVE JACKSONVILLE, FL 32256 28TH FLOOR NEW YORK, NY 10167 **Current Mailing Address:** New Mailing Address: 8659 BAYPINE ROAD, SUITE 300 245 PARK AVE JACKSONVILLE, FL 32256 28TH FLOOR NEW YORK, NY 10167 FEI Number: 59-3544233 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: PCD ( ) Delete Title: (X) Change ( ) Addition WHITESIDE, JOSEPH J Name: KLINGER, GARY P Name: 8659 BAYPINE ROAD, SUITE 300 FOSTER PLAZA #5 651 HOLIDAY DR, SUITE 300 Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: PITTSBURGH, PA 15220 VSTD Title: Title: () Delete (X) Change ( ) Addition Name: SCHLEITER, ROBERT F JR. Name: RICHARDS, BRUCE T 8659 BAYPINE ROAD, SUITE 300 245 PARK AVE, 28TH FLOOR Address: Address: JACKSONVILLE, FL 32256 NEW YORK, NY 10167 City-St-Zip: City-St-Zip: Title: Title: ( ) Change (X) Addition () Delete DIR MOORE, SIMON Name: Name: 245 PARK AVE, 28TH FLOOR Address Address: City-St-Zip: City-St-Zip: NEW YORK, NY 10167 Title: () Delete Title: **VPF** ( ) Change (X) Addition ORVIK, JON C Name: Name: Address: Address: 245 PARK AVE, 28TH FLOOR City-St-Zip: City-St-Zip: NEW YORK, NY 10167 Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: HUTCHINSON, KENNETH T Address: Address: 245 PARK AVE. 28TH FLOOR City-St-Zip: City-St-Zip: NEW YORK, NY 10167

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: KENNETH T. HUTCHINSON VPF 04/28/2006