2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005797

Entity Name: AMGRO RECEIVABLES CORPORATON

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 100 NORTH PARKWAY WORCESTER, MA 10605 **Current Mailing Address: New Mailing Address:** PO BOX 15089 WORCESTER, MA 016150089 FEI Number: 30-0004976 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: CT 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: () Delete Title: () Change () Addition STIDD, ANDREW L Name: Name: 3 PETRELLI LANE Address: Address: City-St-Zip: BABYLON, NY 11702 City-St-Zip: Title: Title: () Delete (X) Change () Addition CHARBONNEAU, KAREN A Name: Name: CHARBONNEAU, KAREN A 68 ROBBINS ROAD 68 ROBBINS ROAD Address: Address: THOMPSON, CT 06277 THOMPSON, CT 06277 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition CRONIN, CHARLES F Name: Name: 57 LONGWOOD DRIVE Address: Address: City-St-Zip: LUNENBURG, MA 01462 City-St-Zip: Title: VΡ () Delete Title: VP/D (X) Change () Addition BIGWOOD, RUSSELL M BIGWOOD, RUSSELL M Name: Name: Address: 407-2 GREAT ROAD Address: 407-2 GREAT ROAD City-St-Zip: ACTON, MA 01720 City-St-Zip: ACTON, MA 01720 Title: Title: () Delete () Change () Addition CAHILL, WILLIAM J JR Name: Name: 10 OLD PLANTERS ROAD Address: Address: City-St-Zip: BEVERLY, MA 01915 City-St-Zip: Title: () Delete Title: P/D (X) Change () Addition MCGIVNEY, MARK C Name: Name: TERRY, WESTON H JR 5 ELIZABETH LANE Address: 81 RUMSTICK ROAD Address: City-St-Zip: BARRINGTON, RI 02806 City-St-Zip: STERLING, MA 01564

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: KAREN A. CHARBONNEAU T 04/24/2007