

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003099

FILED  
May 22, 2007  
Secretary of State

Entity Name: RAMCO SYSTEMS CORPORATION

## Current Principal Place of Business:

3150 BRUNSWICK PIKE, SUITE 100  
LAWRENCEVILLE, NJ 08648

## New Principal Place of Business:

## Current Mailing Address:

3150 BRUNSWICK PIKE, SUITE 100  
LAWRENCEVILLE, NJ 08648

## New Mailing Address:

FEI Number: 77-0325236

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOMMI, SATHESH K  
5787 SAND STONE WAY  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

ARUNACHALAM, PONSUNMUGAM  
8214 PRINCETON SQUARE BLVD.EAST  
#1002  
JACKSONVILLE, FL 32256 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: ARUNACHALAM PONSUNMUGAM

05/22/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: COO ( ) Delete  
Name: MULDER, LOUIS  
Address: 537 NEW GULPH RD  
City-St-Zip: HAVERFORD, PA 19041

Title: S ( ) Delete  
Name: RAMALAKSHMI, NALINA H  
Address: 3150 BRUNSWICK PIKE, SUITE 100  
City-St-Zip: LAWRENCEVILLE, NJ 08648

Title: VC ( ) Delete  
Name: RAJA, P.R. V  
Address: 3150 BRUNSWICK PIKE, SUITE 100  
City-St-Zip: LAWRENCEVILLE, NJ 08648

Title: C ( ) Delete  
Name: RAJHA, P.R. RAMA S  
Address: 3150 BRUNSWICK PIKE, SUITE 100  
City-St-Zip: LAWRENCEVILLE, NJ 08648

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: GILLIGAN, KATHLEEN  
Address: 3150 BRUNSWICK PIKE SUTIE 100  
City-St-Zip: LAWRENCEVILLE, NJ 08648

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

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

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

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.

SIGNATURE: GILLIGAN KATHLEEN

PRES

05/22/2007

Electronic Signature of Signing Officer or Director

Date