2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Secretary of State DOCUMENT # F04000004213 03-01-2006 90195 001 ***450.00 RELATIONAL TECHNOLOGY SERVICES, INC. Principal Place of Business Mailing Address 66003276 3701 ALGONQUIN ROAD, STE. 600 3701 ALGONQUIN ROAD, STE. 600 ROLLING MEADOWS, IL 60008 **ROLLING MEADOWS, IL 60008** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02022006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 31-1210105 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATE SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTD TITLE Delete TITLE CEOPD ☐ Change Addition NAME MORAND, JOHN M NAME JEFFREY H. EHLERS STREET ADDRESS 3701 ALGONQUIN ROAD, STE. 600 STREET ADDRESS 3701 ALGONQUIN ROAD, SUITE 600 CITY-ST-ZIP ROLLING MEADOWS, IL 60008 CITY-ST-ZIP ROLLING MEADOWS, IL 60008 VPD Addition TITLE K Delete TIΠE ☐ Change NAME FLAGSTEAD, DANIEL G NAME ALLAN UMANS STREET ADDRESS 3701 ALGONQUIN ROAD, STE, 600 STREET ADDRESS 3701 ALGONQUIN ROAD, SUITE 600 CITY-ST-ZIP ROLLING MEADOWS, IL 60008 CITY-ST-ZIP ROLLING MEADOWS, IL 60008 ☐ Change TITLE TITLE Delete Addition NAME JORDAN, HORACE W JR NAME MARK E. STACHULSKI STREET ADDRESS 3701 ALGONQUIN ROAD, STE. 600 STREET ADDRESS 3701 ALGONQUIN ROAD, SUITE 600 CITY-ST-ZIP ROLLING MEADOWS, IL 60008 CITY-ST-ZIP ROLLING MEADOWS, IL 60008 ☐ Change Addition ☐ Delete TITLE TITLE VPT NAME NAME CHRISTOPHER M. CZAJA STREET ADDRESS STREET ADDRESS 3701 ALGONQUIN ROAD, SUITE 600 CITY-ST-ZIP CITY-ST-7IP ROLLING MEADOWS, IL 60008 ☐ Change TITLE Oelete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 busiles empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TOTE AND TYPED OF PRINTED NAME OF SRINING OFFICER OR DIRECTOR

2-24-06

FILED Mar 01, 2006 8:00 am