2007 FOR PROFIT CORPORATION

ANNUAL REPORT

Secretary of State DOCUMENT # F04000005154 03-12-2007 90107 024 ***150.00 CHAS. E. RUE & SON, INC. Principal Place of Business Mailing Address 3812 QUAKERBRIDGE ROAD 3812 QUAKERBRIDGE ROAD TRENTON, NJ 08619 TRENTON, NJ 08619 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03012007 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 22-1761405 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. DΡ ☐ Addition πŒ Delete TILE Change NAME RUE, WILLIAM M NAME 3812 QUAKERBRIDGE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TRENTON, NJ 08619 CITY-ST-ZIP D۷ ☐ Delete ☐ Change ☐ Addition TITLE ALLEN, ELIZABETH A NAME NAME STREET ADDRESS 3812 QUAKERBRIDGE ROAD STREET ADDRESS CITY-ST-ZIP TRENTON, NJ 08619 CITY-ST-ZIP ☐ Change ☐ Addition S Delete TITLE TITLE NAME CLAUSER, JOHN P NAME STREET ADDRESS 3812 QUAKERBRIDGE ROAD STREET ADDRESS CITY-ST-ZIP TRENTON, NJ 08619 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE WARN, JOHN J NAME NAME 3812 QUAKERBRIDGE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TRENTON, NJ 08619 CITY-ST-7IP ☐ Delete TITLE Senior Vice-President Change ■ Addition TITLE William M. Rue, Jr. NAME NAME STREET ADDRESS STREET ADDRESS 3812 Quakerbridge Road CITY-ST-7IP CITY-ST-7IP Trenton, NJ 08619 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAVE NAME STREET ADDRESS STREET ADDRESS

FILED Mar 12, 2007 8:00 am

12. Thereby 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 the analysecurate and that my signature shall have the same legal effect as if made under ceth; that I am an officer or director of the corporation or the receiver or trustee employeered 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.

CITY-ST-ZIP

CITY-ST-ZIP

-William M. Rue 3/1/2007 (609)586-7474 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR