

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002364

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: TRG CUSTOMER SOLUTIONS, INC.

## Current Principal Place of Business:

2200 RENAISSANCE BLVD  
SUITE 350  
KING OF PRUSSIA, PA 19406

## New Principal Place of Business:

## Current Mailing Address:

2200 RENAISSANCE BLVD  
SUITE 350  
KING OF PRUSSIA, PA 19406

## New Mailing Address:

FEI Number: 72-1583550

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete  
Name: KELLY, FRANK  
Address: 2200 RENAISSANCE BLVD. SUITE 350  
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: CFO ( ) Delete  
Name: GABEL, KARL  
Address: 2200 RENAISSANCE BLVD. SUITE 350  
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: D ( ) Delete  
Name: KHAISHGI, MOHAMMED  
Address: 1700 PENNSYLVANIA AVE. NW  
City-St-Zip: WASHINGTON, DC 20006

Title: D ( ) Delete  
Name: ASLAM, HASHAIN  
Address: 1700 PENNSYLVANIA AVE. NW  
City-St-Zip: WASHINGTON, DC 20006

Title: D ( ) Delete  
Name: KELLY, FRANK  
Address: 2200 RENAISSANCE BLVD. SUITE 350  
City-St-Zip: KING OF PRUSSIA, PA 19406

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: KARL GABEL

CFO

04/16/2009

Electronic Signature of Signing Officer or Director

Date