2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2007
Secretary of State

DOCUMENT# F05000002458

Entity Name: CHITTENDEN TRUST COMPANY

Current Principal Place of Business:

2 BURLINGTON SQUARE
BURLINGTON, VT 05401

New Principal Place of Business:

Current Mailing Address:

2 BURLINGTON SQUARE
BURLINGTON, VT 05401

New Mailing Address:

FEI Number: 03-0112400 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INTRASTATE REGISTERED AGENT CORP.
701 BRICKELL AVE., SUITE 3000
MIAMI, FL 331313209 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: VS ( ) Delete
Name: PRENTICE, F. SHELDON
Address: 2 BURLINGTON SQUARE
City-St-Zip: BURLINGTON, VT 05401

Title: V ( ) Delete
Name: BARNES, JOHN P
Address: 2 BURLINGTON SQUARE
City-St-Zip: BURLINGTON, VT 05401

Title: V ( ) Delete
Name: O'CONNOR, RAYMOND
Address: 2 BURLINGTON SQUARE
City-St-Zip: BURLINGTON, VT 05401

Title: D ( ) Delete
Name: BERTRAND, FREDERIC
Address: 1423 WEST SHORE ROAD
City-St-Zip: DANVILLE, VT 05873

Title: D (X) Delete
Name: CARRARA, PAUL
Address: 2464 CASE STREET
City-St-Zip: MIDDLEBURY, VT 05753

Title: D ( ) Delete
Name: KELLY, JOHN
Address: TWO BURLINGTON SQUARE
City-St-Zip: BURLINGTON, VT 05401

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:

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

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: F SHELDON PRENTICE VS 04/04/2007

Electronic Signature of Signing Officer or Director — Date