2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# F05000002934

Entity Name: MAC SOURCE COMMUNICATIONS, INC.

Current Principal Place of Business:

701 ERIE BOULEVARD WEST
SYRACUSE, NY 13204

New Principal Place of Business:

Current Mailing Address:

NINE PARKWAY NORTH, SUITE 500
DEERFIELD, IL 60015

New Mailing Address:

FEI Number: 16-1535194 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: DC ( ) Delete
Name: PYE, IAN
Address: NINE PARKWAY N, SUITE 500
City-St-Zip: DEERFIELD, IL 60015

Title: D ( ) Delete
Name: IHLENFELD, BRAD
Address: NINE PARKWAY N, SUITE 500
City-St-Zip: DEERFIELD, IL 60015

Title: P ( ) Delete
Name: MCDERMOTT, TIMOTHY
Address: 701 ERIE BLVD. WEST
City-St-Zip: SYRACUSE, NY 13204

Title: VPT ( ) Delete
Name: BRANNAN, MICHAEL
Address: NINE PARKWAY N, SUITE 500
City-St-Zip: DEERFIELD, IL 60015

Title: S ( ) Delete
Name: SLATER, ROCHELLE
Address: NINE PARKWAY N, SUITE 500
City-St-Zip: DEERFIELD, IL 60015

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 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: ROCHELLE SLATER S 04/28/2006

Electronic Signature of Signing Officer or Director Date