## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000006416

Entity Name: BLUE FOX NEDGRAPHICS, INC.

FILED Mar 27, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Clirrent Principal Place of Kilciness	NOW Principal Place of Bilgings

104 WEST 40TH STREET
12TH FLOOR
NEW YORK, NY 10018
104 WEST 40TH STREET
FLOOR 12
NEW YORK, NY 10018
NEW YORK, NY 10018

Current Mailing Address: New Mailing Address:

 104 WEST 40TH STREET
 104 WEST 40TH STREET

 12TH FLOOR
 FLOOR 12

 NEW YORK, NY 10018
 NEW YORK, NY 10018

FEI Number: 52-1625045 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete Title: DIR (X) Change ( ) Addition

Name: VAN STEIJN, CEES J Name: PULLENS, H.J.J.

Address: 104 WEST 40TH STREET 12TH FLOOR Address: 104 WEST 40TH STREET FLOOR 12

City-St-Zip: NEW YORK, NY 10018 City-St-Zip: NEW YORK, NY 10018

Title: PRES ( ) Delete Title: PRES (X) Change ( ) Addition

Name: VIMONT, ERIC Name: VIMONT, ERIC

Address: 104 WEST 40TH STREET 12TH FLOOR Address: 104 WEST 40TH STREET FLOOR 12

City-St-Zip: NEW YORK, NY 10018 City-St-Zip: NEW YORK, NY 10018

Title: ST ( ) Delete Title: ST (X) Change ( ) Addition

Name: SHERMAN, MARY Name: SHERMAN, MARY

Address: 104 WEST 40TH STREET 12TH FLOOR Address: 104 WEST 40TH STREET FLOOR 12

City-St-Zip: NEW YORK, NY 10018 City-St-Zip: NEW YORK, NY 10018

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: MARY SHERMAN ST 03/27/2009