

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007361

Entity Name: CAPITALSOURCE INC.

FILED
May 11, 2008
Secretary of State

Current Principal Place of Business:

ATTN: CAROLYN SILVA
4445 WILLARD AVE., 12TH FLOOR
CHEVY CHASE, MD 20815

New Principal Place of Business:

Current Mailing Address:

ATTN: CAROLYN SILVA
4445 WILLARD AVE., 12TH FLOOR
CHEVY CHASE, MD 20815

New Mailing Address:

FEI Number: 35-2206895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CCEO () Delete
Name: DELANEY, JOHN K
Address: 4445 WILLARD AVENUE
City-St-Zip: CHEVY CHASE, MD 20815 US

Title: P () Delete
Name: GRAHAM, DEAN C
Address: 4445 WILLARD AVE
City-St-Zip: CHEVY CHASE, MD 20815 US

Title: EVP () Delete
Name: CORSINI, BRIAN
Address: 4445 WILLARD AVENUE
City-St-Zip: CHEVY CHASE, MD 20815 US

Title: EVP () Delete
Name: MUSELES, STEVEN A
Address: 4445 WILLARD AVENUE
City-St-Zip: CHEVY CHASE, MD 20815 US

Title: CAO (X) Delete
Name: BJARNASON, DAVID
Address: 4445 WILLARD AVE
City-St-Zip: CHEVY CHASE, MD 20815 US

Title: SVP () Delete
Name: FINK, THOMAS
Address: 4445 WILLARD AVENUE
City-St-Zip: CHEVY CHASE, MD 20815 US

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
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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: CAROLYN SILVA-QUGALIATO

AS

05/11/2008

Electronic Signature of Signing Officer or Director

Date