

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000054

FILED
Mar 27, 2009
Secretary of State

Entity Name: NATIONAL CITY PARTNERSHIP SOLUTIONS, INC.

Current Principal Place of Business:

1900 EAST NINTH STREET
CLEVELAND, OH 44114

New Principal Place of Business:

Current Mailing Address:

1900 EAST NINTH STREET
LOC. 01-2174
CLEVELAND, OH 44114

New Mailing Address:

FEI Number: 45-0544692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE, FL 32301 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: DCEO () Delete
Name: BIBB, PAUL E
Address: 3232 NEWMARK DR.
City-St-Zip: MIAMISBURG, OH 45342

Title: DP () Delete
Name: CARTELLONE, JOSEPH
Address: 1900 EAST NINTH STREET
City-St-Zip: CLEVELAND, OH 44114

Title: DV () Delete
Name: WALTER, JOHN D
Address: 3232 NEWMARK DR.
City-St-Zip: MIAMISBURG, OH 45342

Title: V () Delete
Name: DEMOSS, DANIEL J.
Address: 1900 E. NINTH ST., LOC. 01-2174
City-St-Zip: CLEVELAND, OH 44114

Title: S () Delete
Name: FLYNN, PATRICK J.
Address: 1900 E. NINTH ST., LOC. 01-2174
City-St-Zip: CLEVELAND, OH 44114

Title: AS () Delete
Name: WEXLER, CATHERINE B
Address: 1900 EAST NINTH STREET
City-St-Zip: CLEVELAND, OH 44114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BRUNKER, GLENN
Address: 3232 NEWMARK DR.
City-St-Zip: MIAMISBURG, OH 45342

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

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

Title: V (X) Change () Addition
Name: DEMOSS, DANIEL J.
Address: ONE PNCE PLAZA, 249 FIFTH AVENUE
City-St-Zip: PITTSBURGH, PA 15222

Title: S (X) Change () Addition
Name: WEXLER, CATHERINE B
Address: 1900 E. NINTH STREET
City-St-Zip: CLEVELAND, OH 44114

Title: AS (X) Change () Addition
Name: FLYNN, PATRICK J
Address: 1900 EAST NINTH STREET
City-St-Zip: CLEVELAND, OH 44114

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: CATHERINE B. WEXLER

S

03/27/2009

Electronic Signature of Signing Officer or Director

_____ Date