## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000001945

Entity Name: DB SERVICES NEW JERSEY, INC.

FILED Mar 10, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
100 PLAZA ONE - 34 EXCHANGE PLACE JERSEY CITY, NJ 07311				100 PLAZA ONE - 34 EXCHANGE PLACE JERSEY CITY, NJ 07311 US			
Current Mailing Address:				New Mailing Address:			
100 PLAZA ONE - 34 EXCHANGE PLACE JERSEY CITY, NJ 07311				100 PLAZA ONE - 34 EXCHANGE PLACE JERSEY CITY, NJ 07311 US			
FEI Number:	13-3184273	FEI Number Applied For ( )	FEI Number	r Not Appli	cable ( )	Certificate of Status Desired ( )	
Name and	Address of C	ırrent Registered Agent:	Na	me and	Address of	New Registered Agent:	
1200 SOUT	ORATION SYS TH PINE ISLAN DN, FL 33324						
The above in the State		ubmits this statement for the pur	rpose of ch	anging it	s registered	office or registered agent, or bo	oth,
SIGNATUR	E:						
Electronic Signature of Registered Agent						Date	_
Election Cam	paign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	PVD () HESTER, FOY B 60 WALL ST N' NEW YORK, NY	/C60-3012	Ado	e: me: dress: y-St-Zip:	FOY, 60 WALL ST	(X) Change ( ) Addition  NY 10005 US	
Title: Name: Address: City-St-Zip:	S () WEST, SANDRA 60 WALLSTREE NEY YORK, NY	T-NYCO60-3012	Ado	e: me: dress: y-St-Zip:	SANDRA, 60 WALLSTF	(X) Change()Addition REET NY 10005 US	
Title: Name: Address: City-St-Zip:	SCOTT, ALAN	Delete - 34 EXCHANGE PLACE IJ 07311	Ado	e: me: dress: y-St-Zip:	D (X) Change ( ) Addition SCOTT, ALAN 100 PLAZA ONE - 34 EXCHANGE PLACE JERSEY CITY, NJ 07311 US		
Title: Name: Address: City-St-Zip:	T (X) NAPPO, JOHN 100 PLAZA ONE JERSEY CITY, N	- 34 EXCHANGE PLACE				()Change ()Addition	
Title: Name: Address: City-St-Zip:	C (X) FRIER, ROBERT 25 DEFOREST A SUMMIT, NJ 079	VE.			1	( ) Change ( ) Addition	

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: SANDRA L WEST S 03/10/2009