

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000004605

FILED  
Feb 26, 2007  
Secretary of State

Entity Name: BLASLAND, BOUCK & LEE, INC.

## Current Principal Place of Business:

6723 TOWPATH ROAD, BOX 66  
SYRACUSE, NY 13214

## New Principal Place of Business:

## Current Mailing Address:

6723 TOWPATH ROAD, BOX 66  
SYRACUSE, NY 13214

## New Mailing Address:

ATTN: LEGAL DEPARTMENT  
6723 TOWPATH RD., BOX 66  
SYRACUSE, NY 13214

FEI Number: 16-1448024

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: T ( ) Delete  
Name: BROWN, DENNIS C  
Address: NORTHERN TRUST 4001 TAMiami TR N. STE 250  
City-St-Zip: NAPLES, FL 341030066

Title: DP ( ) Delete  
Name: LYNCH, EDWARD R  
Address: 11000 REGENCY PARKWAY WEST, TOWER STE 205  
City-St-Zip: CARY, NC 27511

Title: S ( ) Delete  
Name: VOZZO, H. LARRY  
Address: 6723 TOWPATH ROAD, BOX 66  
City-St-Zip: SYRACUSE, NY 13214

Title: AT ( ) Delete  
Name: SIANO, STEPHEN J  
Address: 6723 TOWPATH ROAD, BOX 66  
City-St-Zip: SYRACUSE, NY 13214

Title: DCEO ( ) Delete  
Name: GOLDMAN, ROBERT K  
Address: 6723 TOWPATH RD., BOX 66  
City-St-Zip: SYRACUSE, NY 13214

Title: D ( ) Delete  
Name: BLAKE, STEVE  
Address: 630 PLAZA DRIVE, SUITE 200  
City-St-Zip: HIGHLANDS RANCH, CO 80129

## 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:

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: H. LARRY VOZZO

S

02/26/2007

Electronic Signature of Signing Officer or Director

Date