

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000003742

Entity Name: COMMUNITY SYSTEMS, INC.

FILED
Apr 07, 2007
Secretary of State

Current Principal Place of Business:

C/O DAVID W. FELL
2 N. RIVERSIDE PLAZA STE 800
CHICAGO, IL 60606

New Principal Place of Business:

Current Mailing Address:

C/O DAVID W. FELL
2 N. RIVERSIDE PLAZA STE 800
CHICAGO, IL 60606

New Mailing Address:

FEI Number: 36-3967300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEXIS DOCUMENT SERVICES INC.
1201 HAYS STREET
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: VT () Delete
Name: SEAVEY, PAUL
Address: 2 N RIVERSIDE PLAZA STE 800
City-St-Zip: CHICAGO, IL 60606

Title: CEOP () Delete
Name: HENEGHAN, THOMAS P
Address: 2 N. RIVERSIDE PLAZA STE 800
City-St-Zip: CHICAGO, IL 60606

Title: V (X) Delete
Name: CROOK, CHARLES
Address: 28050 US HWY 19 NORTH #400
City-St-Zip: CLEARWATER, FL 33761

Title: DEVP () Delete
Name: KELLEHER, ELLEN
Address: TWO NORTH RIVERSIDE PLAZA, #800
City-St-Zip: CHICAGO, IL 60606

Title: VS () Delete
Name: FELL, DAVID W
Address: TWO NORTH RIVERSIDE PLAZA, #800
City-St-Zip: CHICAGO, IL 60606

Title: EVP () Delete
Name: MAYNARD, ROGER
Address: TWO NORTH RIVERSIDE PLAZA, #800
City-St-Zip: CHICAGO, IL 60606

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: DAVID FELL

VS

04/07/2007

Electronic Signature of Signing Officer or Director

_____ Date