## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000000990

Entity Name: CPSF, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1100 NORTH KING ST. WILMINGTON, DE 19884 US			100 FEDERAL BOSTON, MA 02110 US			
Current Mailing Address:				New Mailing Address:		
MS #2811 WILMINGTON, DE 198842811 US			401 N TRYON ST NC1-021-02-20 CHARLOTTE, ND 28255 US			
FEI Number: 51-0356500 FEI Number Applied For ( ) FEI Num			nber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
1200 SOUT PLANTATIO	DRATION SYS H PINE ISLANI DN, FL 33324	D ROAD US				
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.						
SIGNATUR	E:					
	Electronic	Signature of Registered Agent	t			Date
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	FARRELL, TERE 100 FEDERAL S' BOSTON, MA 02 EVP () E MANZANO, NANC	TREET, MS: MA5-100-32-05 2110 Delete CY L REET, MS: DE5-028-01-01		Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	FARRELL, TER 401 N TRYON S CHARLOTTE, N EVP (X) MANZANO, NAM	ST; NC1-021-02-20 IC 28255 Change ( ) Addition ICY L ST; NC1-021-02-20
Title: Name: Address: City-St-Zip:	SMITH, CONNIE 100 N. TRYON S' CHARLOTTE, NO	TREET, MS: NC1-007-23-04 : 282550001		Title: Name: Address: City-St-Zip:	. ,	Change ( ) Addition
Title: Name: Address: City-St-Zip:	T () E CRISPINO, ANTH 100 N. TRYON S' CHARLOTTE, NO	IONY D TREET, MS: NC1-007-52-02		Title: Name: Address: City-St-Zip:	POLITES, MAR	STREET, MS: NC1-007-52-02
Title: Name: Address: City-St-Zip:	REILLY, TERESA	REET, MS: DE5-020-01-03		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition
Title: Name: Address: City-St-Zip:	VOLPA, MARY E	Delete REET, MS: DE5-020-01-03 E 19884		Title: Name: Address: City-St-Zip:	()	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: GREG S MROZ SVP 04/30/2007