## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F99000003802

Entity Name: LIEBERT GLOBAL SERVICES, INC.

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business:			Now Prince	New Principal Place of Business:	
610 EXECL	JTIVE CAMPUS ILLE, OH 4308:	BDR	IAGAA ETIIIC	pai Flace of Busiliess.	
Current Mailing Address:			New Mailing Address:		
1050 DEARBORN DRIVE TAX DEPT COLUMBUS, OH 43085					
FEI Number: 43-1798453 FEI Number		FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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.					
SIGNATURE:					
Electronic Signature of Registered Agent Date  Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () DYSERT, S C 610 EXECUTIVE WESTERVILLE, G		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SMITH, H. M	Pelete RISSANT AVENUE 33136	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BERGES, J. G	Pelete RISSANT AVENUE 83136	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BAUER, C T	Pelete RISSANT AVENUE 33136	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () EBENSON, J M EXECUTIVE CAM WESTERVILLE, G		Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition STUDER, M E EXECUTIVE CAMPUS DR WESTERVILLE, OH 43085	
Title: Name: Address: City-St-Zip:	VP () C ROHDE, R A 189 BRIARBEND POWELL, OH 43		Title: Name: Address: City-St-Zip:	T (X) Change ( ) Addition BLIND, J T 1050 DEARBORN DRIVE COLUMBUS, OH 43229	

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: J T BLIND T 04/25/2006