

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005113

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: GRP FINANCIAL SERVICES CORP.

## Current Principal Place of Business:

360 HAMILTON AVENUE  
5TH FLOOR  
WHITE PLAINS, NY 10601

## New Principal Place of Business:

## Current Mailing Address:

360 HAMILTON AVENUE  
5TH FLOOR  
WHITE PLAINS, NY 10601

## New Mailing Address:

FEI Number: 13-4074973      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD, INC.  
515 E. PARK AVE.  
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: P ( ) Delete  
Name: BOWDEN, NATALIE  
Address: 360 HAMILTON AVENUE, 5TH FLOOR  
City-St-Zip: WHITE PLAINS, NY 10601

Title: V ( ) Delete  
Name: DINARDI, JOANNE  
Address: 360 HAMILTON AVENUE, 5TH FLOOR  
City-St-Zip: WHITE PLAINS, NY 10601

Title: V ( ) Delete  
Name: WALDMAN, ANDREW  
Address: 360 HAMILTON AVENUE, 5TH FLOOR  
City-St-Zip: WHITE PLAINS, NY 10601

Title: V ( ) Delete  
Name: KOPS, ZEV  
Address: 360 HAMILTON AVENUE, 5TH FLOOR  
City-St-Zip: WHITE PLAINS, NY 10601

Title: S ( ) Delete  
Name: TESS, KRISTIN  
Address: 360 HAMILTON AVENUE, 5TH FLOOR  
City-St-Zip: WHITE PLAINS, NY 10601

Title: D ( ) Delete  
Name: ANDREWS, CHARLES  
Address: 12061 BLUEMONT WAY  
City-St-Zip: RESTON, VA 20190

## 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: KRISTIN TESS

S

01/09/2007

Electronic Signature of Signing Officer or Director

Date