

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H77194

FILED
Apr 17, 2009
Secretary of State

Entity Name: CLIENT BUSINESS SERVICES, INC.

Current Principal Place of Business:

4315 METRO PARKWAY
FT. MYERS, FL 339163500

New Principal Place of Business:

4315 METRO PARKWAY
FT. MYERS, FL 339163500 US

Current Mailing Address:

P.O. BOX 2216
SCHENECTADY, NY 123012216 US

New Mailing Address:

FEI Number: 59-2579139 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: D/P () Delete
Name: DOBBS, RICHARD L
Address: 4211 METRO PARKWAY
City-St-Zip: FORT MYERS, FL 33916

Title: D/V () Delete
Name: SAIL, RONALD A
Address: 1 RIVER ROAD
City-St-Zip: SCHENECTADY, NY 12345

Title: D/V () Delete
Name: STRATTON, LEE C
Address: 3135 EASTON TURNPIKE
City-St-Zip: FAIRFIELD, CT 06828

Title: S () Delete
Name: IANNONE, MALVINA
Address: 777 LONG RIDGE ROAD
City-St-Zip: STAMFORD, CT 06927

Title: V (X) Delete
Name: AMBROSIO, CALMAN J
Address: 1 RIVER ROAD
City-St-Zip: SCHENECTADY, NY 12345

Title: V (X) Delete
Name: CAMERON, BARBARA L
Address: 12 CORPORATE WOODS BLVD
City-St-Zip: ALBANY, NY 12211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MARK
Address: 3135 EASTON TURNPIKE
City-St-Zip: FAIRFIELD, CT 06828 US

Title: D (X) Change () Addition
Name: JOHN
Address: 3135 EASTON TURNPIKE
City-St-Zip: FAIRFIELD, CT 06828 US

Title: S (X) Change () Addition
Name: MALVINA
Address: 800 LONG RIDGE ROAD
City-St-Zip: STAMFORD, CT 06927 US

Title: V (X) Change () Addition
Name: BARBARA
Address: 12 CORPORATE WOODS BLVD
City-St-Zip: ALBANY, NY 12211 US

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 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: BARBARA A CAMERON

V

04/17/2009

Electronic Signature of Signing Officer or Director

_____ Date