2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# H77194

Title:

City-St-Zip:

FILED Jul 15, 2009 Secretary of State

Entity Name: CLIENT BUSINESS SERVICES, INC.	
Current Principal Place of Business:	New Principal Place of Business:
4315 METRO PARKWAY FT. MYERS, FL 339163500 US	
Current Mailing Address:	New Mailing Address:
P.O. BOX 2216 SCHENECTADY, NY 123012216 US	
FEI Number: 59-2579139 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US	
The above named entity submits this statement for the pin the State of Florida.	purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Ag	gent Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title:

City-St-Zip:

() Delete (X) Change () Addition MARK KRAKOWIAK, MARK Name: Name: 3135 EASTON TURNPIKE Address: 3135 EASTON TURNPIKE Address: City-St-Zip: FAIRFIELD, CT 06828 US City-St-Zip: FAIRFIELD, CT 06828 US Title: D () Delete Title: (X) Change () Addition SAMUELS, JOHN Name: **JOHN** Name: Address: Address: 3135 EASTON TURNPIKE 3135 EASTON TURNPIKE FAIRFIELD, CT 06828 US FAIRFIELD, CT 06828 US City-St-Zip: City-St-Zip: Title: Title: S () Delete (X) Change () Addition Name: MALVINA Name: IANNONE, MALVINA 800 LONG RIDGE ROAD Address: 800 LONG RIDGE ROAD Address: City-St-Zip: STAMFORD, CT 06927 US City-St-Zip: STAMFORD, CT 06927 US Title: () Delete Title: (X) Change () Addition CAMERON, BARBARA BARBARA Name: Name: 12 CORPORATE WOODS BLVD 12 CORPORATE WOODS BLVD Address: Address: ALBANY, NY 12211 US ALBANY, NY 12211 US

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 07/15/2009 ٧