

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15833

FILED  
Jun 17, 2009  
Secretary of State

Entity Name: MACKAY COMMUNICATIONS, INC.

## Current Principal Place of Business:

3691 TRUST DRIVE  
RALEIGH, NC 27616 US

## New Principal Place of Business:

## Current Mailing Address:

3691 TRUST DRIVE  
RALEIGH, NC 27616 US

## New Mailing Address:

FEI Number: 56-1550100      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: PD ( ) Delete  
Name: PRATT, BEN L.  
Address: 308 SWAN'S MILL CROSSING  
City-St-Zip: RALEIGH, NC 27614

Title: DV ( ) Delete  
Name: PRATT, GRETCHEN G.  
Address: 308 SWAN'S MILL CROSSING  
City-St-Zip: RALEIGH, NC 27614

Title: PDST ( ) Delete  
Name: SCHLACKS, JEFFREY  
Address: 12137 LOCKHART LANE  
City-St-Zip: RALEIGH, NC 27614

Title: VP ( ) Delete  
Name: MARRA, JOHN  
Address: 3 MONTREAL SQUARE  
City-St-Zip: MARLBORO, NJ 07746

Title: VP ( ) Delete  
Name: ECKSTINE, DAVID A  
Address: 733 CHURCHILL DRIVE  
City-St-Zip: WAKE FOREST, NC 27587

Title: VP ( ) Delete  
Name: LEMOINE, DAVID M  
Address: 2643 WEST DALLAS ST  
City-St-Zip: HOUSTON, TX 77019

## 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 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: DOUGLAS HANSON

MGR

06/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date