


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P32190</b> 1. Entity Name LEXMARK INTERNATIONAL, INC.	
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Principal Place of Business 740 NEW CIRCLE ROAD DEPT. 968L/001-1 LEXINGTON, KY 40511	Mailing Address 740 NEW CIRCLE ROAD DEPT. 968L/001-1 LEXINGTON, KY 40511
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01162007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 06-1308215	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000606441  
01/30/07-80079-005 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	CURLANDER, PAUL J
STREET ADDRESS	740 NEW CIR RD
CITY-ST-ZIP	LEXINGTON, KY 40550
TITLE	VP
NAME	GAMBLE, JOHN
STREET ADDRESS	740 NEW CIR RD
CITY-ST-ZIP	LEXINGTON, KY 40550
TITLE	S
NAME	COLE, VINCENT J
STREET ADDRESS	740 NEW CIR RD
CITY-ST-ZIP	LEX, KY 40550
TITLE	T
NAME	PELINI, RICK
STREET ADDRESS	740 NEW CIR RD
CITY-ST-ZIP	LEXINGTON, KY 40550
TITLE	VPT
NAME	BORK, DANIEL
STREET ADDRESS	740 NEW CIR RD
CITY-ST-ZIP	LEX, KY 40550
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Daniel Bork* DANIEL BORK 1/16/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #