2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P37649

FILED Jan 30, 2009 Secretary of State

Entity Name: VERSA MANAGEMENT SYSTEMS, INC.

Current Principal Place of Business: New Principal Place of Business: 617 WESLEY AVE OAK PARK, IL 60304 **Current Mailing Address: New Mailing Address:** 200 YORKLAND BLVD STE 1200 TORONTO, ON M2J 5C1 FEI Number: 36-2989060 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: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CHMN () Delete Title: () Change () Addition Name: BINNION, LARRY R MR Name: 109 BURBANK DR Address: Address: City-St-Zip: TORONTO, ON M2K 1N6 OC City-St-Zip: Title: **PCEO** Title: () Delete () Change () Addition PHILP, BROCK MR Name: Name: 180 SHERWOOD PLACE Address: Address: City-St-Zip: NEWMARKET, ON L3Y 8E5 City-St-Zip: () Delete Title: Title: () Change () Addition GOTTLIEB, THOMAS MR Name: Name: 551 ST CLEMENTS AVENUE Address: Address: City-St-Zip: TORONTO, ON M5N 1M5 City-St-Zip: Title: DIR () Delete Title: () Change () Addition KATZ, LEONARD MR Name: Name: Address: 44 WALL STREET Address: City-St-Zip: NEW YORK, NY 10005 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: BROCK PHILP PCEO 01/30/2009