2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000060553

Entity Name: CORPOREX OCP CORPORATION

Current Principal Place of Business:	**New Principal Place of Business:**
100 E RIVERCENTER BLVD SUITE 1100 COVINGTON, KY 41011	

Current Mailing Address:	**New Mailing Address:**
C/O CORPORATE SECRETARY PO BOX 75020 CINCINNATI, KY 452750020	

FEI Number: 59-3394828   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 323012525 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:	DPT	( ) Delete		Title:		( ) Change ( ) Addition
Name:	BUTLER, BILL			Name:		
Address:	100 E RIVERCENTER BLVD., SUITE 1100			Address:		
City-St-Zip:	COVINGTON, KY 41011			City-St-Zip:		

Title:	V	( ) Delete		Title:		( ) Change ( ) Addition
Name:	THOMAS E BANTA,			Name:		
Address:	100 E RIVERCENTER BLVD., SUITE 1100			Address:		
City-St-Zip:	COVINGTON, KY 41011			City-St-Zip:		

Title:	AS	( ) Delete		Title:		( ) Change ( ) Addition
Name:	MARTIN C BUTLER,			Name:		
Address:	50 E RIVERCENTER BLVD., SUITE 1400			Address:		
City-St-Zip:	COVINGTON, KY 41011			City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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: BILL BUTLER   DPT   01/05/2006
          Electronic Signature of Signing Officer or Director   Date