

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29977

FILED  
Jan 22, 2007  
Secretary of State

Entity Name: ICX CORPORATION

## Current Principal Place of Business:

2 SUMMIT PARK DRIVE  
SUITE 300  
CLEVELAND, OH 44131

## New Principal Place of Business:

## Current Mailing Address:

2 SUMMIT PARK DRIVE  
SUITE 300  
CLEVELAND, OH 44131

## New Mailing Address:

FEI Number: 34-1583171      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301      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: BOULDEN, LAIRD  
Address: 71 S WACKER DR., 28TH FLR  
City-St-Zip: CHICAGO, IL 60606

Title: SVP ( ) Delete  
Name: BENDER, GERALD F.,  
Address: 2 SUMMIT PARK DRIVE, SUTIE 300  
City-St-Zip: CLEVELAND, OH 44131

Title: SVPT ( ) Delete  
Name: LOVINS, JAMES T.,  
Address: 2 SUMMIT PARK DRIVE, STE 300  
City-St-Zip: CLEVELAND, OH 44131

Title: SVPS ( ) Delete  
Name: BABBITT, MICHAEL R.,  
Address: 2 SUMMIT PARK DRIVE, STE 300  
City-St-Zip: CLEVELAND, OH 44131

Title: SVP ( ) Delete  
Name: ROWLAND, ROBERT H.,  
Address: 2 SUMMIT PARK DRIVE, STE 300  
City-St-Zip: CLEVELAND, OH 44131

Title: DSVP ( ) Delete  
Name: O'CONNOR, STEVE  
Address: 71 S WACKER DR., 28TH FLR  
City-St-Zip: CHICAGO, IL 60606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: OWNBY, WAYNE,  
Address: 4780 HINCKLEY INDUSTRIAL PARKWAY  
City-St-Zip: CLEVELAND, OH 44109

Title: T (X) Change ( ) Addition  
Name: COSTA, CLAIRE,  
Address: ONE CITIZENS PLAZA, RLC300  
City-St-Zip: PROVIDENCE, RI 02903

Title: AS (X) Change ( ) Addition  
Name: GRANT, CATHERINE,  
Address: 189 CANAL STREET  
City-St-Zip: PROVIDENCE, RI 02903

Title: DSVP (X) Change ( ) Addition  
Name: WILLE, ROBERT,  
Address: 71 S. WACKER DRIVE, 28TH FLOOR  
City-St-Zip: CHICAGO, IL 60606

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: CATHERINE GRANT

AS

01/22/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date