

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 816187

FILED
Jan 12, 2004
Secretary of State

Entity Name: AMERICAN ARBITRATION ASSOCIATION, INC.

Current Principal Place of Business:

335 MADISON AVE
NEW YORK, NY 10017

New Principal Place of Business:

Current Mailing Address:

335 MADISON AVE
NEW YORK, NY 10017

New Mailing Address:

FEI Number: 13-0429745

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 323019501 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SLATE, WILLIAM K II
Address: 335 MADISON AVE
City-St-Zip: NEW YORK, NY 10017

Title: S () Delete
Name: COFFMAN, JENNIFER J
Address: 335 MADISON AVE
City-St-Zip: NEW YORK, NY 10017

Title: GC () Delete
Name: PETERSON, FLORENCE M
Address: 335 MADISON AVE
City-St-Zip: NEW YORK, NY 10017

Title: V () Delete
Name: EMMERT, JOHN C JR
Address: 395 MADISON AV
City-St-Zip: NEW YORK, NY 10017

Title: T () Delete
Name: ROSSI, FRANCESCO
Address: 335 MADISON AV
City-St-Zip: NEW YORK, NY 10017

Title: DC () Delete
Name: LAHEY, EDWARD V JR
Address: 9 FERRY STREET
City-St-Zip: ESSEX, CT 06426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: GC (X) Change () Addition
Name: TUCHMANN, ERIC
Address: 335 MADISON AVE
City-St-Zip: NEW YORK, NY 10017

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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNIFER J. COFFMAN

S

01/12/2004

Electronic Signature of Signing Officer or Director

Date