## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 12, 2001 8:00 am Secretary of State DOCUMENT# 831895 1. Entity Name 🗼 -MARITZ MARKETING RESEARCH INC. 04-12-2001 90014 025 \*\*\*150.00 Principal Place of Business Mailing Address 1375 NO HWY DR 1375 NORTH HIGHWAY DRIVE FENTON MO 63099 ATTN: TAX DEPARTMENT FENTON MO 63099-0100 2. Principal Place of Business 3. Mailing Address Maritz Marketing Research Inc. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 1375 North Highway Drive City & State City & State Applied For 4. FEI Number 43-0890097 Not Applicable Fenton MO Country Zip Country \$8.75 Additional 63099 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL-33324 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See critería on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Delete ☐ Change CR2E034 (10/00) TITI F TITLE KIENKER, JAMES W. NAME Carol Miller Wofsey NAME 7171 Fingsbury Boulevard 2 GEYERWOOD LANE STREET ADDRESS STREET ADDRESS St Louis MO 63130 CITY-ST-ZIP CITY-ST-7IP ST LOUIS MO TITLE ☐ Delete TITLE ROGERS, WILLIAM T NAME NAME Michael D Phillips 2008 ANDRAES LN STREET ADDRESS STREET ADDRESS 1804 Parsonage drive CITY-ST-ZIP **CHESTERFIELD MO 63005** CITY-ST-ZIP St Louis MO 63005 TITLE TITLE ☐ Change Addition ☐ Delete n Richard T Ramos RISBERG, JOHN F NAME NAME STREET ADDRESS 520 SCOTT AVE STREET ADDRESS 4991 Southridge Park Dr CITY-ST-ZIP CITY-ST-ZIP SAINT LOUIS MO 63122 St Louis MO 63129 X Addition ☐ Change TITLE ☐ Delete TITLE Michael T Brereton STOLAR, HENRY S NAME NAME 27198 Cambridge Lane STREET ADDRESS 59 KINGSBURRY PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST LOUIS MO 63112 Farmington Hills MI 48331 TITLE Delete ☐ Change X Addition TITLE KNEIDI, CATHERINE E NAME NAME Marsha J Young 18 EAST SNOW STREET ADDRESS STREET ADDRESS 1167 Chavaniak CITY-ST-ZIP ST LOUIS MD CITY-ST-ZIP Manchester MO 63011 ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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

SIGNATURE:X James W. Kienk

4-06-01

(636) 827-2320

Daytime Phone #