

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90003 037 ***150.00

DOCUMENT # **F00000003206**

1. Entity Name
SEISMIQ, INC.

Principal Place of Business
100 CAMPUS DRIVE
FLORHAM PARK NJ 07932

Mailing Address
100 CAMPUS DRIVE
FLORHAM PARK NJ 07932

2. Principal Place of Business
651 W. Washington Blvd
 Suite, Apt. #, etc.
6th Floor

3. Mailing Address
P.O. Box 931
 Suite, Apt. #, etc.

City & State
Chicago IL
 Zip
60661
 Country
USA

City & State
TOLEDO OH
 Zip
43699-0931
 Country
USA

4. FEI Number **22-3722653**
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	<input checked="" type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	<input checked="" type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	<input checked="" type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	<input checked="" type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

Director, President, Asst Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Paul J. Bishop	
1801 Richards Road	
Toledo, Ohio 43607 USA	
Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Edward J. Shultz	
1801 Richards Road	
Toledo, Ohio 43607 USA	
Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Gary Degregorio	
651 W. Washington Blve 6th Floor	
Chicago, IL 60661 USA	
Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Thomas C. Wajnert	
8473 Bay Colony Drive	
Naples, FL 34108 USA	
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Paul J. Bishop* **Paul J. Bishop** 4/30/01
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Attachment
970813
#F00000003206

Directors, Officers Report

Seismiq, Inc.

Friday, April 27, 2001

DIRECTORS

Paul J Bishop **Director**
Primary Address: 1801 Richards Road
Toledo, Ohio 43607 USA

Gary Degregorio **Director**
Primary Address: Thoughtworks, Inc.
651 W. Washington Blvd., 6th Floor
Chicago, IL 60661 US

Edward J Shultz **Director**
Primary Address: 1801 Richards Road
Toledo, Ohio 43607 USA

Neville Roy Singham **Director**
Primary Address: Thoughtworks, Inc.
651 W. Washington Blvd., 6th Floor
Chicago, IL 60661 US

Thomas C Wajnert **Director**
Primary Address: 8473 Bay Colony Drive
Naples, FL 34108 US

OFFICERS

Stein Laxo **Vice President - Operations**
Primary Address: Seismiq, Inc.
1111 Bayhill Drive, Suite 435
San Bruno, CA 94066 US

Kenneth Sanders **Vice President - Sales**
Primary Address: Thoughtworks, Inc.
651 W. Washington Blvd., 6th Floor
Chicago, IL 60661 US

Paul J Bishop **President and Assistant Treasurer**
Primary Address: 1801 Richards Road
Toledo, Ohio 43607 USA

Neville Roy Singham **Secretary and Treasurer**
Primary Address: Thoughtworks, Inc.
651 W. Washington Blvd., 6th Floor
Chicago, IL 60661 US