## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F00000004069

Entity Name: EXPEDITIONARY LEARNING OUTWARD BOUND, INC.

FILED Aug 28, 2002 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

100 MYSTERY POINT ROAD 100 MYSTERY POINT ROAD GARRISON, NY 105249757 GARRISON, NY 105249757 US

**Current Mailing Address: New Mailing Address:** 

100 MYSTERY POINT ROAD 100 MYSTERY POINT ROAD GARRISON, NY 105249757 US GARRISON, NY 105249757

FEI Number: 06-1576405 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:

NRAI SERVICES, INC. 526 E. PARK AVE. TALLAHASSEE, FL 32301 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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition

() Delete CLOUGH, GRUFFIE KLINGENSTEIN, LEE Name: Name: 1003 MILWAUKEE STREET Address: 31 OXFORD ROAD Address:

City-St-Zip: DENVER, CO City-St-Zip: SCARSDALE, NY 10583 US

Title: PD Title: (X) Change ( ) Addition ( ) Delete FARRELL, GREG Name: FARRELL, GREG Name:

Address: 100 MYSTERY POINT ROAD Address: 100 MYSTERY POINT ROAD

GARRISON, NY 10524 US City-St-Zip: GARRISON, NY City-St-Zip:

Title: STD () Delete Title: T/D (X) Change ( ) Addition FRANCY, PATRICIA Name: FRANCY, PATRICIA Name:

2910 BROADWAY 1700 BROADWAY, 10TH FLOOR Address: Address:

City-St-Zip: NEW YORK, NY City-St-Zip: NEW YORK, NY 10019 US

Title: ( ) Delete Title: (X) Change ( ) Addition FRANCHOT, DOUG Name: Name: FRANCHOT, DOUG

1550 UTICA AVE SOUTH, STE 425 810 LAKE STREET EAST Address: Address: City-St-Zip: MINNEAPOLIS, MN City-St-Zip: WAYZATA, MN 553911837 US

Title: () Delete Title: (X) Change ( ) Addition

GABLE, ROBERT GABLE, ROBERT Name: Name:

7 CONTINENTAL BLVD 800 TURNPIKE STREET, SUITE 300 Address: Address: NORTH ANDOVER, MA 01845 US City-St-Zip: MERRIMACK, NH City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

GROSSMAN, ALLEN GROSSMAN, ALLEN Name: Name: Address: 439 MORGAN HALL Address: 33 RESERVOIR STREET CAMBRIDGE, MA 02138 US BOSTON, MA City-St-Zip: 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: GREG FARRELL P/D 08/28/2002