

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # F99000005545 1. Entity Name KORN/FERRY INTERNATIONAL, INC.																																																																																
Principal Place of Business 1800 CENTURY PARK EAST, SUITE 900 LOS ANGELES, CA 90067				Mailing Address 1800 CENTURY PARK EAST, SUITE 900 LOS ANGELES, CA 90067																																																																												
2. Principal Place of Business 1900 Avenue of the Stars		3. Mailing Address 1900 Avenue of the Stars		 04052005 Chg-P CR2E034 (10/03)																																																																												
Suite, Apt #, etc. 2600		Suite, Apt #, etc. 2600																																																																														
City & State Los Angeles, CA		City & State Los Angeles, CA																																																																														
Zip 90067		Zip 90067																																																																														
4. FEI Number 95-2623879				Applied For ☐ Not Applicable																																																																												
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE, FL 32301																																																																												
7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.																																																																																
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE																																																																																
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%;">Delete</td> </tr> <tr> <td>NAME</td> <td>PCEO</td> <td>☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td>REILLY, PAUL</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>1800 CENTURY PARK E. SUITE 900</td> <td></td> </tr> <tr> <td></td> <td>LOS ANGELES, CA 90067</td> <td></td> </tr> <tr> <td>TITLE</td> <td>SD</td> <td>☐</td> </tr> <tr> <td>NAME</td> <td>DUNN, PETER L</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1800 CENTURY PARK EAST, SUITE 900</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LOS ANGELES, CA 90067</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VT</td> <td>☐</td> </tr> <tr> <td>NAME</td> <td>BURNISON, GARY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1800 CENTURY PARK EAST, SUITE 900</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LOS ANGELES, CA 90067</td> <td></td> </tr> <tr> <td>TITLE</td> <td>V</td> <td>☐</td> </tr> <tr> <td>NAME</td> <td>HOURIHAN, GARY C</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1800 CENTURY PARK EAST, SUITE 900</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LOS ANGELES, CA 90067</td> <td></td> </tr> <tr> <td>TITLE</td> <td>CD</td> <td>☐</td> </tr> <tr> <td>NAME</td> <td>FERRY, RICHARD M</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1800 CENTURY PARK EAST, SUITE 900</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LOS ANGELES, CA 90067</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td>☐</td> </tr> <tr> <td>NAME</td> <td>BARLETT, JAMES E</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1800 CENTURY PARK EAST, SUITE 900</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LOS ANGELES, CA 90067</td> <td></td> </tr> </table>		TITLE	NAME	Delete	NAME	PCEO	☐	STREET ADDRESS	REILLY, PAUL		CITY-ST-ZIP	1800 CENTURY PARK E. SUITE 900			LOS ANGELES, CA 90067		TITLE	SD	☐	NAME	DUNN, PETER L		STREET ADDRESS	1800 CENTURY PARK EAST, SUITE 900		CITY-ST-ZIP	LOS ANGELES, CA 90067		TITLE	VT	☐	NAME	BURNISON, GARY		STREET ADDRESS	1800 CENTURY PARK EAST, SUITE 900		CITY-ST-ZIP	LOS ANGELES, CA 90067		TITLE	V	☐	NAME	HOURIHAN, GARY C		STREET ADDRESS	1800 CENTURY PARK EAST, SUITE 900		CITY-ST-ZIP	LOS ANGELES, CA 90067		TITLE	CD	☐	NAME	FERRY, RICHARD M		STREET ADDRESS	1800 CENTURY PARK EAST, SUITE 900		CITY-ST-ZIP	LOS ANGELES, CA 90067		TITLE	D	☐	NAME	BARLETT, JAMES E		STREET ADDRESS	1800 CENTURY PARK EAST, SUITE 900		CITY-ST-ZIP	LOS ANGELES, CA 90067	
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%;">Delete</td> </tr> <tr> <td>NAME</td> <td>U000000316975</td> <td>☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td>04/19/05-80099-009 150.00</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	NAME	Delete	NAME	U000000316975	☐	STREET ADDRESS	04/19/05-80099-009 150.00		CITY-ST-ZIP			12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																		
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SIGNATURE: <u>Peter L. Dunn</u> Peter L. Dunn 4/5/2005 (310) 552-1834 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																																																																