## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10751

Entity Name: VALUATION RESEARCH CORPORATION

FILED Apr 20, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 330 EAST KILBOURN AVE. **SUITE 1020** MILWAUKEE, WI 53202 **Current Mailing Address: New Mailing Address:** 330 E KILBOURN AVE STE 1020 MILWAUKEE, WI 53202 US FEI Number: 39-1214928 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 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: SEVD ( ) Delete Title: () Change () Addition Name: BRATTEBO, MARK R Name: 100 NASSAU PARK BLVD Address: Address: City-St-Zip: PRINCETON, NJ 08540 City-St-Zip: SEVD Title: Title: () Delete () Change () Addition Name: HUGHES, WILLIAM J. Name: 2211 YORK ROAD # 200 Address: Address: City-St-Zip: OAK BROOK, IL 60523 City-St-Zip: Title: () Delete Title: VAS () Change () Addition KNIER, CHANTAL S Name: Name: 330 F KILBOURNE AVE # 1020 Address: Address: MILWAUKEE, WI 53202 City-St-Zip: City-St-Zip: Title: **VPTS** ( ) Delete Title: () Change () Addition ANN, KRAMER C. Name: Name: Address: 330 E. KILBORN, #1020 Address: City-St-Zip: MILWAUKEE, WI 53202 City-St-Zip: Title: SVPD Title: () Delete () Change () Addition SCHULTE, ROBERT A Name: Name: 101 FEDERAL ST. #1900 Address: Address: City-St-Zip: BOSTON, MA 02110 City-St-Zip: Title: CHD () Delete Title: () Change () Addition Name: KELLY, NEIL C. Name: 100 NASSAU PARK BLVD. Address: Address: City-St-Zip: City-St-Zip: PRINCETON, NJ 08540

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHANTAL S. KNIER VAS 04/20/2006