


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 08:00 AM
Secretary of State


DOCUMENT # P22519
 1. Entity Name
THE URBAN INSTITUTE CORPORATION



Principal Place of Business
**2100 M STREET, NW
 WASHINGTON, DC 20037**

Mailing Address
**2100 M STREET, NW
 WASHINGTON, DC 20037**

DO NOT WRITE IN THIS SPACE



03072007 No Chg-NP CR2E037 (4/06)

4. FEI Number 52-0880375	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by May 1, 2007**

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


10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REISCHAUER, ROBERT D 2100 M STREET, NW WASHINGTON, DC 20037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOT ROGERS, JOHN R 2100 M STREET, NW WASHINGTON, DC 20037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP ROGERS, JOHN R 2100 M STREET, NW WASHINGTON, DC 20037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS PLANANSKY, ROBERT G 2100 M ST. N.W. WASHINGTON, DC 20037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC COURRIER, KATHLEEN 2100 M ST NW WASHINGTON, DC 20037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000679101
 04/03/07-80025-007 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:  **Robert G. Planansky** **03/07/2007** **202-261-5787**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #