NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 18, 2003 8:00 am Secretary of State

04-18-2003 90446 044 ****61.25

DOCUMENT # P22519 1. Entity Name THE URBAN INSTITUTE CORPORATION 10077807 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 2100 M STREET, N.W. 2100 M STREET, N.W. Suite, Apt. #, etc. Suite Apt # etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For WASHINGTON, D.C. WASHINGTON, D.C. 52-0880375 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 20037 20037 Name and Address of Current Registered Agent CT CORPORATION SYSTEM DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 1200 S. PINE ISLAND ROAD Zip Code PLANTATION 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FEE IS 661.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Florida Department of State Initial or Amended UBR Added to Fees OFFICERS AND DIRECTORS 10. A ITIT REISCHAUER, ROBERT D. NAME STREET ADDRESS 2100 M STREET, N.W. CITY - ST - ZIP WASHINGTON D.C. 20037 V & CFO TITLE ROGERS, JOHN R. 2100 M STREET, N.W. NAME STREET ADDRESS STREET/ADDRES CITY-ST-ZIP WASHINGTON, D.C. 20037 TITLE NAME GRANT, H. MORTON STREET ADDRESS 2100 M STREET, N.W. DO NOT WRITE CITY-ST-ZIP WASHINGTON, D.C. 20037 TITLE PLANANSKY, ROBERT G. NAME STREET ADDRESS 2100 M STREET, N.W. CITY - ST-ZIP WASHINGTON, D.C. 20037 VC COURRIER, KATHLEEN NAME 14 aye 5 5 2100 M STREET, N.W. STREET ADDRESS CITY-ST-ZIP WASHINGTON, D.C. 2003 ASTRONO DE MELER, BRENDA P. TITLE NAME TOLETE STREET ADDRESS 2100 M STREET, N.W. CITY-ST-ZIP WASHINGTON, D.C. 20037

12. 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 performs required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or on an

SIGNATURE: H. MORTON

(202)261-5711