

2901 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90363 001 ****61.25

DOCUMENT # 823274

1. Entity Name

College Entrance Examination Board

Principal Place of Business

45 Columbus Avenue
 New York, NY 10023-6992

Mailing Address

45 Columbus Avenue
 New York, NY 10023-6992

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

13-1623965

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	S	☒ Delete
NAME	Hendel, Patricia K.	
STREET ADDRESS	500 East 77 Street	
CITY-ST-ZIP	New York, NY 10162	
TITLE	PT	☐ Delete
NAME	Gaston Caperton	
STREET ADDRESS	1 West 72 Street	
CITY-ST-ZIP	New York, NY 10023	
TITLE	V	☐ Delete
NAME	Frederick H. Dietrich	
STREET ADDRESS	Heritage Court	
CITY-ST-ZIP	Hillside, NJ 07642	
TITLE	V	☐ Delete
NAME	Richard Weingarten	
STREET ADDRESS	45 Columbus Avenue	
CITY-ST-ZIP	New York, NY 10023	
TITLE	T	☐ Delete
NAME	Thomas W. Payzant	
STREET ADDRESS	25 Court Street	
CITY-ST-ZIP	Boston, MA	
TITLE	T	☐ Delete
NAME	Linda M. Clement	
STREET ADDRESS	Mitchell Bldg	
CITY-ST-ZIP	College Park, MD 20742	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	S	☐ Change ☒ Addition
NAME	Dorothy Sexton	
STREET ADDRESS	45 Columbus Avenue	
CITY-ST-ZIP	New York, NY 10023-6992	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 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: Richard Weingarten

4/25/01

212-713-8024

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)