2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 823274

Entity Name: COLLEGE ENTRANCE EXAMINATION BOARD

Current Principal Place of Business:

45 COLUMBUS AVENUE NEW YORK, NY 10023

FILED Feb 26, 2014 Secretary of State CC8491366437

Current Mailing Address:

45 COLUMBUS AVENUE NEW YORK, NY 10023 US

FEI Number: 13-1623965 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: STEVEN TITAN 02/26/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **SECRETARY** Title **PRESIDENT** Name SEXTON, DOROTHY A Name COLEMAN, DAVID Address Address 45 COLUMBUS AVENUE 45 COLUMBUS AVE NEW YORK NY 10023 NEW YORK NY 10023 City-State-Zip: City-State-Zip:

Title TREASURER Title CHAIRMAN OF BOARD AND OFFICER

Name TITAN, STEVEN T Name KEITA, MAGHAN

Address 45 COLUMBUS AVENUE Address 45 COLUMBUS AVENUE
City-State-Zip: NEW YORK NY 10023
City-State-Zip: NEW YORK NY 10023

Title CHIEF OPERATING OFFICER Title VICE CHAIRMAN AND OFFICER

Name SINGER, JEREMY Name ORT, SHIRLEY A

Address 45 COLUMBUS AVENUE Address 45 COLUMBUS AVENUE
City-State-Zip: NEW YORK NY 10023
City-State-Zip: NEW YORK NY 10023

Title PAST CHAIR OF BOARD AND Title DIRECTOR

CURRENT DIRECTOR

Name

SECHRIST, PAUL W

Address

Address

45 COLUMBUS AVENUE

City-State-Zip:

NEW YORK NY 10023

City-State-Zip: NEW YORK NY 10023

Continues on page 2

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN TITAN TREASURER 02/26/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title Title DIRECTOR DIRECTOR Name BROSTROM, NATHAN Name CHANG, SHUNG FANG 45 COLUMBUS AVENUE Address 45 COLUMBUS AVENUE Address City-State-Zip: NEW YORK NY 10023 City-State-Zip: NEW YORK NY 10023 Title **DIRECTOR** Title DIRECTOR Name CHUNG, BELINDA W CHRISTIANSEN, DOUGLAS L Name Address 45 COLUMBUS AVENUE Address 45 COLUMBUS AVENUE NEW YORK NY 10023 City-State-Zip: NEW YORK NY 10023 City-State-Zip: Title **DIRECTOR** DIRECTOR Title Name ETIENE, MARGARETH Name COOPER, KAREN 45 COLUMBUS AVENUE Address Address 45 COLUMBUS AVENUE NEW YORK NY 10023 City-State-Zip: City-State-Zip: NEW YORK NY 10023 Title **DIRECTOR** Title DIRECTOR Name FRANCIS-BEGAY, KAREN Name FLORES, CHIO Address 45 COLUMBUS AVENUE Address 45 COLUMBUS AVENUE City-State-Zip: NEW YORK NY 10023 City-State-Zip: NEW YORK NY 10023 Title DIRECTOR Title **DIRECTOR** Name GILL, BARBARA A Name GILCHRIST, WILLIE L Address 45 COLUMBUS AVENUE Address 45 COLUMBUS AVENUE City-State-Zip: NEW YORK NY 10023 City-State-Zip: NEW YORK NY 10023 Title **DIRECTOR** Title DIRECTOR Name HORNE, PAMELA T Name GRIER, TERRY Address 45 COLUMBUS AVENUE Address 45 COLUMBUS AVENUE City-State-Zip: NEW YORK NY 10023 City-State-Zip: NEW YORK NY 10023 Title **DIRECTOR** Title **DIRECTOR** Name MANSFIELD, VON Name HUERTA, MARGIE Address 45 COLUMBUS AVENUE Address 45 COLUMBUS AVENUE City-State-Zip: NEW YORK NY 10023 City-State-Zip: NEW YORK NY 10023 Title DIRECTOR Title DIRECTOR Name NUCCIARONE, MARY B Name MARTINEZ-FERNANDEZ, LUIS Address 45 COLUMBUS AVENUE Address 45 COLUMBUS AVENUE City-State-Zip: NEW YORK NY 10023 City-State-Zip: NEW YORK NY 10023 Title **DIRECTOR** Title DIRECTOR Name PORTERFIELD, DANIEL R Name PAULSON, PAM Address 45 COLUMBUS AVENUE Address 45 COLUMBUS AVENUE City-State-Zip: NEW YORK NY 10023 City-State-Zip: NEW YORK NY 10023 Title **DIRECTOR** Title **DIRECTOR** Name SORRELL, MICHAEL

Name SCHILLING, WILLIAM M
Address 45 COLUMBUS AVENUE

Address 45 COLUMBUS AVENUE
City-State-Zip: NEW YORK NY 10023

City-State-Zip: NEW YORK NY 10023

Address

45 COLUMBUS AVENUE

 Title
 DIRECTOR

 Name
 TILTON, JIM

 Name
 STORLAZZI, CAESAR T

Address 45 COLUMBUS AVENUE
City-State-Zip: NEW YORK NY 10023

Title DIRECTOR

Name TUCKER, JOHN A

Address 45 COLUMBUS AVENUE
City-State-Zip: NEW YORK NY 10023

Title DIRECTOR

Name WEAVER, PAUL G

Address 45 COLUMBUS AVENUE
City-State-Zip: NEW YORK NY 10023

City-State-Zip: NEW YORK NY 10023

Title DIRECTOR

Name VERZYL, SCOTT

Address 45 COLUMBUS AVENUE City-State-Zip: NEW YORK NY 10023