

**2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000004813

**Entity Name:** CONSUMER REPORTS, INC.**Current Principal Place of Business:**101 TRUMAN AVENUE  
YONKERS, NY 10703**Current Mailing Address:**101 TRUMAN AVENUE  
YONKERS, NY 10703**FEI Number:** 13-1776434**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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

**Officer/Director Detail :**

Title            PRESIDENT, CEO  
Name            TELLADO, MARTA  
Address        101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title            CHAIRMAN  
Name            ALVARADO, JOAQUIN  
Address        101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title            BOARD MEMBER  
Name            LOVOI, ANNETTE  
Address        101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title            BOARD TREASURER  
Name            COWAN, DEBORAH  
Address        101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title            VC  
Name            ENGEL, KATHLEEN  
Address        101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title            BOARD MEMBER  
Name            SIMS, CALVIN  
Address        101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title            BOARD MEMBER  
Name            HOVIS, JOANNE  
Address        101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title            BOARD MEMBER  
Name            STINEBRICKNER-KAUFFMAN, TAREN  
Address        101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

**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: MARTA TELLADO****PRESIDENT, CEO****07/10/2023**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title BOARD MEMBER  
Name MAY, WILLIE E  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title BOARD MEMBER  
Name BETSY, SCOLNIK D  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title BOARD MEMBER  
Name KELLEHER, JAMESON  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title SVP & CFO  
Name WAYNE, ERIC  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title BOARD MEMBER  
Name HOOVER, STEPHEN P  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title BOARD MEMBER  
Name NIKITRA, BAILEY  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title BOARD MEMBER  
Name OGBURN, WILLARD  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title BOARD MEMBER  
Name SIFRY, MICAH  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title BOARD MEMBER  
Name TAUS, ELLEN  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title GENERAL COUNSEL  
Name HUBNER, MICHAEL  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title BOARD MEMBER  
Name VERMEER, ASTRID D  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703

Title BOARD MEMBER  
Name NIKITRA, BAILEY  
Address 101 TRUMAN AVENUE  
City-State-Zip: YONKERS NY 10703