

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000002331

**Entity Name:** DIRECTIONS RESEARCH, INC.

**Current Principal Place of Business:**

401 E COURT STREET  
CINCINNATI, OH 45202

**Current Mailing Address:**

401 E COURT STREET  
CINCINNATI, OH 45202 US

**FEI Number: 31-1236894**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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            VICE PRESIDENT  
Name            BRINKER, JANICE  
Address        401 E COURT STREET  
City-State-Zip: CINCINNATI OH 45202

Title            SECRETARY  
Name            WILDE, STEVE  
Address        401 E COURT STREET  
City-State-Zip: CINCINNATI OH 45202

Title            PRESIDENT, DIRECTOR  
Name            LANE, JAMES  
Address        401 E COURT STREET  
City-State-Zip: CINCINNATI OH 45202

Title            SENIOR STAFF ACCOUNTANT  
Name            KELLER , CARRIE  
Address        401 E COURT STREET  
City-State-Zip: CINCINNATI OH 45202

Title            TREASURER  
Name            THRASH, PHILLIP  
Address        401 E COURT STREET  
City-State-Zip: CINCINNATI OH 45202

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

**SIGNATURE: CARRIE KELLER**

**SENIOR STAFF  
ACCOUNTANT**

**04/28/2020**

Electronic Signature of Signing Officer/Director Detail

Date