2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10751

Entity Name: VALUATION RESEARCH CORPORATION

Current Principal Place of Business:

330 EAST KILBOURN AVE. SUITE 1425 MILWAUKEE, WI 53202

Current Mailing Address:

330 EAST KILBOURN AVE. SUITE 1425 MILWAUKEE, WI 53202 US

FEI Number: 39-1214928

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	SEVD	Title	SEVD	
Name	PATEL, PJ	Name	JOHNSON, JUSTIN E.	
Address	800 TOWNSHIP LINE ROAD SUITE 250	Address	50 CALIFORNIA STREET SUITE 1300	
City-State-Zip:	YARDLEY PA 19067	City-State-Zip:	SAN FRANCISCO CA 94111	
Title	SVPS	Title	SVPT	
Name	KNIER, CHANTAL S	Name	TRUOG, JAMES P.	
Address	330 EAST KILBOURN AVE.	Address	330 EAST KILBOURN AVE. SUITE 1425	
City-State-Zip:	SUITE 1425 MILWAUKEE WI 53202	City-State-Zip:	MILWAUKEE WI 53202	
		Title	CHD	
Title	SVPD	Name	KELLY, NEIL C.	
Name Address	VANKIRK, LAWRENCE E 105 E. FOURTH ST	Address	800 TOWNSHIP LINE ROAD SUITE 250	
City-State-Zip:	SUITE 1005 CINCINNATI OH 45202	City-State-Zip:	YARDLEY PA 19067	
		Title	SVPD	
Title	SMD	Name	CZAPLA, JOHN D.	
Name Address	BRATTEBO, MARK R. 800 TOWNSHIP LINE ROAD	Address	800 TOWNSHIP LINE ROAD SUITE 250	
City-State-Zip:	SUITE 250 YARDLEY PA 19067	City-State-Zip:	YARDLEY PA 19067	
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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: CHANTAL S. KNIER

SR VP/SECRETARY 04/02/2019

Electronic Signature of Signing Officer/Director Detail

Apr 02, 2019 Secretary of State 8604783893CC

FILED

Certificate of Status Desired: No

Date

Date

Officer/Director Detail Continued :

Title	SVPMD
Name	HUGHES, WILLIAM J.
Address	200 W. MADISON ST. SUITE 2110
City-State-Zip:	CHICAGO IL 60606