


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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**FILED**  
**May 11, 1999 8:00 am**  
**Secretary of State**

05-11-1999 90034 028 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>				FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # 846070</b> 1. Corporation Name <b>J. WALTER THOMPSON U.S.A., INC.</b>					
Principal Place of Business <b>420 LEXINGTON AVE NY NY 10170 US</b>			Mailing Address <b>C/O WPP GROUP USA, INC 309 WEST 49TH ST. 14TH FL NY NY 10019-399 US</b>		
2. Principal Place of Business <b>21</b>		2a. Mailing Address <b>26</b>		4. FEI Number <b>13-3016052</b>	
Suite, Apt. #, etc. <b>22</b>		Suite, Apt. #, etc. <b>27</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
City & State <b>23</b>		City & State <b>28</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Zip <b>24</b>		Country <b>25</b>		7. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324</b>			10. Name and Address of New Registered Agent <b>81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code</b>		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable					
<b>12. OFFICERS AND DIRECTORS</b>					
TITLE	AT	<input type="checkbox"/> DELETE			
NAME	NEUMAN, THOMAS O				
STREET ADDRESS	69 ASPINWALL RD				
CITY-ST-ZIP	BRIARCLIFF MANOR NY				
TITLE	EVP	<input type="checkbox"/> DELETE			
NAME	JORDAN, JAMES J.				
STREET ADDRESS	17 HILL STREET				
CITY-ST-ZIP	RYE NY				
TITLE	CEOD	<input type="checkbox"/> DELETE			
NAME	SCHWEITZER, PETER A.				
STREET ADDRESS	99 LOTHROP ROAD				
CITY-ST-ZIP	GROSS POINTE FARMS MI 48236				
TITLE	EVP	<input type="checkbox"/> DELETE			
NAME	POLLET, RICHARD				
STREET ADDRESS	67 LUDLOW DR.				
CITY-ST-ZIP	CHAPPAQUA, NY.				
TITLE	CFOD	<input type="checkbox"/> DELETE			
NAME	TRENCHER, LEWIS J.				
STREET ADDRESS	29 PENN BLVD				
CITY-ST-ZIP	SCARSDALE NY 10583				
TITLE	EVD	<input checked="" type="checkbox"/> DELETE			
NAME	DARLAND, STEPHEN A.				
STREET ADDRESS	313 GOODHILL RD				
CITY-ST-ZIP	KENTFIELD CA				
		<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Thomas O. Neuman **Thomas O. Neuman, Asst. Treas.** 4/ /99 (212)632-2200  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)

J. WALTER THOMPSON U.S.A., INC.

545010-90034-28  
846070

Peter A. Schweitzer  
CEO/Dir.

99 Lothrop Rd.  
Gross Pointe Farms, MI 48236

Lewis J. Trencher  
CFO/Dir.

29 Penn Blvd.  
Scarsdale, NY 10583

Stephen E. Brown  
Executive V.P.

1726 Shoe Club Dr.  
St. Clairs Shores, MI 48080

John Clinton  
Executive V.P.

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Jeff De Joseph  
Executive V.P.

3 Fernald Rd.  
Bronxville, NY 10708

Lori Donchak  
Executive V.P.

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Kenilworth, IL 60043

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Executive V.P.

25217 E. Roycourt Rd.  
Huntington Wood, MI 48070

Roy A. Glah  
Executive V.P.-  
Administration

47 Carriglea Drive  
Riverside, CT. 06878

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Executive V.P.

3976 Oakhills Drive  
Birmingham, MI 48010

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Executive V.P.

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Rye, NY 10580

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Executive V.P.

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Executive V.P.

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Executive V.P.

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Somers, NY 10589

54540-9004-28  
846070

Richard Pollet  
Executive V.P.  
Gen. Cnsl., Secy.

67 Ludlow Drive  
Chappaqua, NY 10514

Dennis Ryan  
Executive V.P.

200 Church Rd  
Winnetka, IL 60093

Jeffrey White  
Executive V.P.

170 Spaulding Creet Court  
Dunwoody, GA 30360

Thomas O. Neuman  
Assistant Treasurer

69 Aspinwall Road  
Briarcliff Manor, NY 10510

Christopher Jones  
Director

14 East 63<sup>rd</sup> Street  
New York, NY 10021

EAM:dkPOJWTUSA