

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90121 049 ***150.00

DOCUMENT # F00000000554

1. Entity Name

MARSH USA INC. (VIRGINIA)

Principal Place of Business

1166 AVENUE OF THE AMERICAS
NEW YORK NY 10036

Mailing Address

1166 AVENUE OF THE AMERICAS
NEW YORK NY 10036

2. Principal Place of Business

3. Mailing Address

One World Trade Center

Suite, Apt. #, etc.

Suite, Apt. #, etc.

TAX Dept- 98th Fl

City & State

City & State

NY NY

Zip

Country

Zip

Country

10048



DO NOT WRITE IN THIS SPACE

4. FEI Number

54-0632797

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|---|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P EGAN, ROGER E 1166 AVENUE OF THE AMERICAS NEW YORK NY 10036 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S FURST, BARRY W 1166 AVENUE OF THE AMERICAS NEW YORK NY 10036 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
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| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Roger A Szajneger 1166 Ave of the Americas NY NY 10036 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Walter S. Tomason Jr. 1166 Ave of the Americas NY NY 10036 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Joseph Salerno 1166 Ave of the Americas NY NY 10036 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Measure
Roger A Szajneger 4-6-01 212-345-6000

CR2E034 (10/00)

Attachment # P00000000554
821402

Marsh Inc.
One World Trade Center
New York, NY 10048
212 345 6000 Fax: 212 345 0822

MARSH
An **MMC** Company

April 20, 2001

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE FL, 32302-1500

RE: MARSH USA INC. (VA)
2001 ANNUAL REPORT
FEIN# 54-0632797

Gentlemen:

On behalf of the above named, please find enclosed the following:

| | | |
|----------|-----------------------|--------------|
| _____ | Income Tax Return, | Form # _____ |
| _____ | Franchise Tax Report, | Form # _____ |
| _____ | Estimated Tax Return, | Form # _____ |
| <u>X</u> | ANNUAL REPORT | Form # _____ |

For the calendar year 2001
quarter ended

_____ Also enclosed is a check in the amount of \$150.00

_____ No payment is required to be submitted with the enclosed.

_____ The enclosed reflects an overpayment of \$ _____ to be:

_____ Refunded.
_____ Credited to estimated liability.

Please acknowledge receipt of the enclosed by stamping the duplicate of this letter and returning it in the self-addressed enveloped enclosed.

Very truly yours,


JOANNE RUBINO
TAX ACCOUNTANT

Marsh Inc.
One World Trade Center
New York, NY 10048
212 345 6000 Fax: 212 345 0822

821402
Attachment # F0000000554

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TAX ACCOUNTANT