

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0118844 AT

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  
TAX DEPT-98TH  
NEW YORK NY 10036

FILED

03 NOV 19 PM 12:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

121 River Street

Suite, Apt. #, etc.

City & State

Hoboken, NJ

Zip

Country

07030-5794

Country

REINSTATEMENT 2003

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Renee Haggerty*  
Signature, typed or printed name of registered agent

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE \$550.00

After September 10, 2003 Fee will be \$750.00  
Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME EGAN, ROGER E  
STREET ADDRESS 1166 AVENUE OF THE AMERICAS  
CITY-ST-ZIP NEW YORK NY 10036 ☒ Delete

TITLE President + CEO  
NAME Peter F. Garvey  
STREET ADDRESS 1166 Avenue of the Americas  
CITY-ST-ZIP New York, NY 10036 ☒ Change ☐ Addition

TITLE S  
NAME FURST, BARRY W  
STREET ADDRESS 1166 AVENUE OF THE AMERICAS  
CITY-ST-ZIP NEW YORK NY 10036 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
500023806295  
10/15/03--01024--006 \*\*750.00

TITLE T  
NAME SZAUNGARTEN, ROGER A  
STREET ADDRESS 1166 AVE OF THE AMERICAS  
CITY-ST-ZIP NEW YORK NY 10036 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME TOMENSON, WALTER S JR  
STREET ADDRESS 1166 AVE OF THE AMERICAS  
CITY-ST-ZIP NEW YORK NY 10036 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME SALERNO, JOSEPH  
STREET ADDRESS 1166 AVE OF THE AMERICAS  
CITY-ST-ZIP NEW YORK NY 10036 ☒ Delete

TITLE Director  
NAME Roger E. Egan  
STREET ADDRESS 1166 Avenue of the Americas  
CITY-ST-ZIP New York, NY 10036 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE Director  
NAME Walter Tomenson Jr.  
STREET ADDRESS 1166 Avenue of the Americas  
CITY-ST-ZIP New York, NY 10036 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Renee Haggerty*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/6/03

Date

Daytime Phone #

CR2E034 (4/03)