

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90424 008 ***150.00

DOCUMENT # F00000001645

1. Entity Name
CLARK/BARDES CONSULTING, INC.

Principal Place of Business **Mailing Address**
102 SOUTH WYNSTONE PARK DRIVE, SUITE 200 **102 SOUTH WYNSTONE PARK DRIVE, SUITE 200**
NORTH BARRINGTON IL 60010 **NORTH BARRINGTON IL 60010**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business **3. Mailing Address**
2121 SAN JACINTO **2121 SAN JACINTO**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
SUITE 2200 **SUITE 2200**
 City & State City & State
DALLAS, TX **DALLAS, TX**

4. FEI Number **Applied For**
52-2103928 **Not Applicable**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
Zip **Country** **Zip** **Country**
75201 **USA** **75201** **USA**

6. Name and Address of Current Registered Agent **7. Name and Address of New Registered Agent**
C T CORPORATION SYSTEM **Name**
1200 SOUTH PINE ISLAND ROAD **Street Address (P.O. Box Number is Not Acceptable)**
PLANTATION FL 33324 **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, 2002 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	V	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUTLEDGE, JAMES		NAME		
STREET ADDRESS	2121 SAN JACINTO STREET, SUITE 2200		STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX 75201		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENNETT, PAUL J		NAME		
STREET ADDRESS	2121 SAN JACINTO STREET, SUITE 2200		STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX 75201		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DALTON, GEORGE D		NAME		
STREET ADDRESS	255 FISERV DRIVE		STREET ADDRESS		
CITY-ST-ZIP	BROOKFIELD WI 53008		CITY-ST-ZIP		
TITLE	DCFO	<input type="checkbox"/> Delete	TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PYRA, THOMAS		NAME		
STREET ADDRESS	102 SOUTH WYNSTONE PARK DRIVE, SUITE 200		STREET ADDRESS		
CITY-ST-ZIP	NORTH BARRINGTON IL 60010		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	SEE ATTACHED	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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: *Paul Pyra* **4/4/02** **214-661-3543**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0903271 AT

CR2E034 (9/01)

Attachment
CLARK/BARDES CONSULTING, INC.

FEIN: 52-2103928

OFFICERS

-775193

Name: W. Thomas Wamberg
Title: Director, Chairman, CEO
Address: 102 Wynstone Park Dr.
N. Barrington, IL 60010
Social Security: 272-54-6528

Name: James C. Bean
Title: Exec. Vice President
Address: 102 S. Wynstone Park Dr.
N. Barrington, IL 60010
Social Security: 472-52-3007

Name: Thomas M. Pyra
Title: Exec. V.P. & CFO
Address: 102 Wynstone Park Dr.
N. Barrington, IL 60010
Social Security: 357-42-8448

Name: Christopher Parker
Title: Vice President
Address: 2121 San Jacinto, Ste. 2200
Dallas, TX 75201
Social Security: 356-54-7430

Name: Donald C. Wegmiller
Title: Exec. Vice President
Address: 608 2nd Ave., South, Ste. 370
Minneapolis, MN 55402
Social Security: 474-38-0965

Name: William J. Gallegos
Title: Vice President
Address: 2121 San Jacinto, Ste. 2200
Dallas, TX 75201
Social Security: 433-23-3052

Name: Robert E. Miller
Title: Exec. Vice President
Address: 3600 W. 80th St., Suite 200
Minneapolis, MN 55431
Social Security: 501-44-9324

Name: Becky A. Letsche
Title: V.P. and Controller
Address: 2121 San Jacinto, Ste. 2200
Dallas, TX 75201
Social Security: 481-86-4222

Name: Richard C. Chapman
Title: Exec. Vice President
Address: 3600 W. 80th St., Suite 200
Minneapolis, MN 55431
Social Security: 480-60-9202

Name: Paul Bennett
Title: Secretary
Address: 2121 San Jacinto, Ste. 2200
Dallas, TX 75201
Social Security: 137-26-2432

Name: James V. Meyer
Title: Senior Vice President
Address: 3600 W. 80th St., Suite 200
Minneapolis, MN 55431
Social Security: 473-66-7299

Name: Tera Mears
Title: Assistant Secretary
Address: 102 S. Wynstone Park Dr.
N. Barrington, IL 60010
Social Security: 505-84-2003

DIRECTORS

Name: Randolph A. Pohlman
Title: Director
Address: 3100 SW 9th Ave.,
Ft. Lauderdale, FL 33315
Social Security: 511-42-5953

Name: George D. Dalton
Title: Director
Address: 528 Northview Rd.
Waubesa, WI 53188
Social Security: 340-20-3964

Name: L. William Seidman
Title: Director
Address: 1025 Connecticut Ave., NW
Washington, DC 20036
Social Security: 363-14-6387

Name: Steven F. Piaker
Title: Director
Address: 185 Asylum St.
Hartford, CT 06103
Social Security: 128-40-7812

Name: Bill Archer
Title: Director
Address: 1301 K St., NW, Ste. 800 West
Washington, DC 20005-3333
Social Security: 453-36-8321