

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90174 028 ***150.00

DOCUMENT # F00000001645



1. Entity Name
CLARK/BARDES CONSULTING, INC.

Principal Place of Business
**2121 SAN JACINTO
STE 2200
DALLAS TX 75201**

Mailing Address
**2121 SAN JACINTO
STE 2200
DALLAS TX 75201**



2. Principal Place of Business

3. Mailing Address
102 S. Wynstone Park Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

City & State
North Barrington, IL

4. FEI Number **52-2103928**

Applied For
Not Applicable

Zip

Country

Zip

Country

60010

USA

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:

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**EV
MILLER, ROBERT E
3600 W. 80TH ST. STE 200
MINNEAPOLIS MN 55431** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BENNETT, PAUL J
2121 SAN JACINTO STREET, SUITE 2200
DALLAS TX 75201** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Secretary
Tera Mears
102 S. Wynstone Park Drive
N. Barrington, IL 60010** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DALTON, GEORGE D
255 FISERV DRIVE
BROOKFIELD WI 53008** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
PYRA, THOMAS
102 SOUTH WYNSTONE PARK DRIVE, SUITE 200
NORTH BARRINGTON IL 60010** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DCEO
WAMBERG, THOMAS
102 WYNSTON PARK DR.
BARRINGTON IL 60010** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPC
LETSCH, BECKY A
2121 SAN JACINTO STE 2200
DALLAS TX 75201** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 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

Thomas M. Pyra 4/14/03 (847) 304-5800

Date

Daytime Phone #

CR2E034 (10/02)