

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2001 8:00 am**  
**Secretary of State**

04-23-2001 90038 023 \*\*\*150.00

**DOCUMENT # F00000004474**

1. Entity Name

**IMS HEALTH INCORPORATED**

Principal Place of Business

**200 NYALA FARMS  
 WESTPORT CT 06880**

Mailing Address

**200 NYALA FARMS  
 WESTPORT CT 06880**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **06-1506026**

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	CD	<input checked="" type="checkbox"/> Delete
NAME	WEISSMAN, ROBERT E	
STREET ADDRESS	200 NYALA FARMS	
CITY-ST-ZIP	WESTPORT CT 06880	
TITLE	PCEO	<input checked="" type="checkbox"/> Delete
NAME	FASH, VICTORIA R	
STREET ADDRESS	200 NYALA FARMS	
CITY-ST-ZIP	WESTPORT CT 06880	
TITLE	CFO	<input type="checkbox"/> Delete
NAME	MALONE, JAMES C	
STREET ADDRESS	200 NYALA FARMS	
CITY-ST-ZIP	WESTPORT CT 06880	
TITLE	VT	<input type="checkbox"/> Delete
NAME	FRIEDMAN, MATTHEW L	
STREET ADDRESS	200 NYALA FARMS	
CITY-ST-ZIP	WESTPORT CT 06880	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	NANCE, ROBIN Y	
STREET ADDRESS	200 NYALA FARMS	
CITY-ST-ZIP	WESTPORT CT 06880	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	HOOPER, ROBERT W	
STREET ADDRESS	660 WEST GERMANTOWN PIKE	
CITY-ST-ZIP	PLYMOUTH MEETING PA 19462	

TITLE	Executive Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Gilles Pajot	
STREET ADDRESS	7 Harewood Ave. London, NW1 6JB	
CITY-ST-ZIP	United Kingdom	
TITLE	C.E.O.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	David M. Thomas	
STREET ADDRESS	2000 Nyala Farms Road	
CITY-ST-ZIP	Westport, CT 06880	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Secretary	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert H. Steinfeld	
STREET ADDRESS	200 Nyala Farms Road	
CITY-ST-ZIP	Westport, CT 06880	
TITLE	Vice President	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Wendy Timmins	
STREET ADDRESS	7 Harewood Ave. NW1 6JB, London	
CITY-ST-ZIP	United Kingdom	

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

**Matthew L. Friedman** 4/15/01 203-222-4588

Date

Daytime Phone #

CR2E034 (10/00)