

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004813

FILED  
Feb 04, 2009  
Secretary of State

**Entity Name:** CONSUMERS UNION OF UNITED STATES, INC.

**Current Principal Place of Business:**

101 TRUMAN AVENUE  
YONKERS, NY 10703

**New Principal Place of Business:**

**Current Mailing Address:**

101 TRUMAN AVENUE  
YONKERS, NY 10703

**New Mailing Address:**

**FEI Number:** 13-1776434

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GUEST, JAMES A  
Address: 101 TRUMAN AVENUE  
City-St-Zip: YONKERS, NY 10703

Title: V ( ) Delete  
Name: GURIN, JOEL  
Address: 101 TRUMAN AVENUE  
City-St-Zip: YONKERS, NY 10703

Title: D ( ) Delete  
Name: ADLER, ROBERT S  
Address: BUSINESS SCHOOL, UNIVERSITY OF N.C.  
City-St-Zip: CHAPEL HILL, NC 275993490

Title: D ( ) Delete  
Name: BAKER, WILLIAM F  
Address: 450 WEST 33RD STREET, 6TH FLOOR  
City-St-Zip: NEW YORK, NY 10001

Title: D ( ) Delete  
Name: BJORKLUND, CHRISTINE A  
Address: 1616 PLYMOUTH AVENUE  
City-St-Zip: SAN FRANCISCO, CA 94127

Title: D ( ) Delete  
Name: BROOKS, BERNARD E  
Address: P.O. BOX 1861  
City-St-Zip: SPARTANBURG, SC 293041861

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CFO (X) Change ( ) Addition  
Name: GANNON, RICHARD  
Address: 101 TRUMAN AVENUE  
City-St-Zip: YONKERS, NY 10703

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JILL MOORE

LGL

02/04/2009

Electronic Signature of Signing Officer or Director

Date