

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000001312

1. Entity Name
JURAN INSTITUTE, INC.

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90301 023 ***150.00

Principal Place of Business

11 RIVER ROAD
WILTON CT 06897

Mailing Address

11 RIVER ROAD
WILTON CT 06897

2. Principal Place of Business

115 Old Ridgefield Rd.

3. Mailing Address

P.O. Box 811

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Wilton, CT

City & State
Wilton, CT

4. FEI Number 13-2982872

Applied For
Not Applicable

Zip
06897-0811

Country
US

Zip
06897-0811

Country
US

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD., INC.
1406 HAYS STREET, SUITE 2
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	COBD GODFREY, A B 11 RIVER ROAD WILTON CT 06897	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JURAN, JOSEPH M 11 RIVER ROAD WILTON CT 06897	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JURAN, CHARLES E 8186 RED OAK ROAD PRESCOTT AZ	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEFEO, JOSEPH A 11 RIVER RD WILTON CT 06897	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILSON, ROBERT E 11 RIVER RD. WILTON CT 06897	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Godfrey, A. Blanton 92 Keelers Ridge Wilton, CT 06897	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	115 Old Ridgefield Rd. Wilton, CT 06897-0811	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	115 Old Ridgefield Rd. Wilton, CT 06897-0811	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	115 Old Ridgefield Rd. Wilton, CT 06897-0811	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: Robert E. Wilson Robert E. Wilson 01/24/2001 203 761-1601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Attachment
A0017029

Juran Institute, Inc.
115 Old Ridgefield Road, Wilton, CT 06897-0811

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Addendum to Item 12 - Complete Listing of Officers & Directors

Title Director
President
Name Joseph A. DeFeo
Address Juran Institute, Inc.
115 Old Ridgefield Road
Wilton, CT 06897-0811

Title Director
Name Joseph M. Juran
Address Juran Institute, Inc.
115 Old Ridgefield Road
Wilton, CT 06897-0811

Title Director
Name Charles E. Juran
Address 8186 Red Oak Rd.
Prescott, AZ 86301

Title Director
Name William H. Elliott
Address 800 North Michigan Avenue, #2801
Chicago, IL 60611

Title Director
Name David G. Bluestein
Address 25 Wild Turkey Court
Ridgefield, CT 06877

Title Director
Name W. Frank Jones
Address 4 McCrea Lane
Darien, CT 06820

Title Director
Name A. Blanton Godfrey
Address 92 Keelers Ridge
Wilton, CT 06897

Title Secretary
Name Robert E. Wilson
Address Juran Institute, Inc.
115 Old Ridgefield Road
Wilton, CT 06897-0811

Attachment
A0017029

Juran Institute, Inc.
115 Old Ridgefield Road, Wilton, CT 06897-0811

Addendum to Item 13 - Additions/Changes to Officers & Directors in 12

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Deletions to Officers & Directors not Shown in Item 12

Title	Director
Name	Harvey Dershin
Address	Juran Institute, Inc. 11 River Road Wilton, CT 06897

Title	Director
Name	John G. Higgins
Address	18725 North Dallas Parkway, Apt. #825 Dallas, TX 75287