

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90144 043 ***158.75

DOCUMENT # F95000002327

1. Entity Name
MERCATOR SOFTWARE, INC.



Principal Place of Business
45 DANBURY RD.
WILTON CT 06897-0840

Mailing Address
45 DANBURY RD.
WILTON CT 06897-0840

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 **06-1132156**

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S 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 ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CEPC** ☐ Delete
NAME **KING, ROY C**
STREET ADDRESS **45 DANBURY ROAD**
CITY-ST-ZIP **WILTON CT 06897**

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

TITLE **S** ☒ Delete
NAME **KLEIN, GERALD E**
STREET ADDRESS **45 DANBURY ROAD**
CITY-ST-ZIP **WILTON CT 06897**

TITLE **Secretary** ☐ Change ☒ Addition
NAME **GORET, DAVID L.**
STREET ADDRESS **45 DANBURY ROAD**
CITY-ST-ZIP **WILTON, CT 06897**

TITLE **D** ☐ Delete
NAME **SISCO, DENNIS**
STREET ADDRESS **BEHRMAN CAPITAL, 126 E 56TH STREET**
CITY-ST-ZIP **NEW YORK NY 10022**

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

TITLE **D** ☒ Delete
NAME **BAKER, DIANE**
STREET ADDRESS **120 STATE STREET**
CITY-ST-ZIP **BROOKLYN NY 11201**

TITLE **Director** ☐ Change ☒ Addition
NAME **LEHMAN, MICHAEL E.**
STREET ADDRESS **45 DANBURY ROAD**
CITY-ST-ZIP **WILTON, CT 06897**

TITLE **D** ☒ Delete
NAME **LITTLE, RICHARD**
STREET ADDRESS **275 MADISON AVENUE**
CITY-ST-ZIP **NEW YORK NY 10016**

TITLE **Director** ☐ Change ☒ Addition
NAME **STEVENS, MARK C.**
STREET ADDRESS **45 DANBURY ROAD**
CITY-ST-ZIP **WILTON, CT 06897**

TITLE **D** ☐ Delete
NAME **KEET, ERNEST E**
STREET ADDRESS **619 MARINA BLVD**
CITY-ST-ZIP **SAN FRANCISCO CA 94123**

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

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 REQUIRED

David L. Goret, Secretary

January 27, 2003

Date

Daytime Phone #

203-563-1335

CR2E034 (10/02)