

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005024

FILED
Apr 20, 2009
Secretary of State

Entity Name: INSTITUTE FOR INTERNATIONAL RESEARCH, INC.

Current Principal Place of Business:

708 THIRD AVE
4TH FLOOR
NEW YORK, NY 10017 US

New Principal Place of Business:

Current Mailing Address:

170 WEST ELECTION ROAD
SUITE 201
DRAPER, UT 84020 US

New Mailing Address:

101 ARTHUR ANDERSEN PKWY, STE 100
SARASOTA, FL 34232 US

FEI Number: 13-3179256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: ROGERS, SCOTT
Address: 170 WEST ELECTION ROAD, SUITE 201
City-St-Zip: DRAPER, UT 84020

Title: T () Delete
Name: DONAGHER, KEVIN
Address: ONE RESEARCH DRIVE
City-St-Zip: WESTBOROUGH, MA 01581

Title: S () Delete
Name: ETTER, THOMAS C
Address: 17 STATE STREET 32ND FLOOR
City-St-Zip: NEW YORK, NY 10004

Title: P () Delete
Name: CHIPMAN, DEBRA
Address: 708 THIRD AVENUE, 4TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: D () Delete
Name: CHIPMAN, DEBRA
Address: 708 THIRD AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: D () Delete
Name: ETTER, THOMAS C
Address: 17 STATE STREET 32ND FLOOR
City-St-Zip: NEW YORK, NY 10004

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT ROGERS

VP

04/20/2009

Electronic Signature of Signing Officer or Director

Date