

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90224 039 ***150.00

DOCUMENT # F97000000263

1. Entity Name
YOUNG & RUBICAM INC.



Principal Place of Business
**285 MADISON AVENUE
NEW YORK, NY 10017**

Mailing Address
**125 PARK AVENUE
4TH FLOOR
NEW YORK, NY 10017**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04062004

Chg-P

CR2E034 (10/03)

4. FEI Number
13-1493710

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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. 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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **FUDGE, ANN**
STREET ADDRESS **285 MADISON AVENUE**
CITY-ST-ZIP **NEW YORK, NY 10017**

TITLE ☐ Delete
NAME **LAW-GISIKO, PETER**
STREET ADDRESS **285 MADISON AVENUE**
CITY-ST-ZIP **NEW YORK, NY 10017**

TITLE ☐ Delete
NAME **SD HOWE, MARY ELLEN**
STREET ADDRESS **125 PARK AVENUE**
CITY-ST-ZIP **NEW YORK, NY 10017**

TITLE ☐ Delete
NAME **VD NEUMAN, THOMAS O**
STREET ADDRESS **125 PARK AVENUE**
CITY-ST-ZIP **NEW YORK, NY 10017**

TITLE ☐ Delete
NAME **CD SORRELL, MARTIN S SIR**
STREET ADDRESS **125 PARK AVENUE**
CITY-ST-ZIP **NEW YORK, NY 10017**

TITLE ☐ Delete
NAME **D RICHARDSON, PAUL W.G.**
STREET ADDRESS **125 PARK AVENUE**
CITY-ST-ZIP **NEW YORK, NY 10017**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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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:

Thomas O. Neuman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/04

Date

212-632-2200

Daytime Phone #