

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000000263

Entity Name: YOUNG & RUBICAM INC.

FILED  
Mar 21, 2007  
Secretary of State

## Current Principal Place of Business:

285 MADISON AVENUE  
NEW YORK, NY 10017

## New Principal Place of Business:

## Current Mailing Address:

125 PARK AVENUE  
4TH FLOOR  
NEW YORK, NY 10017

## New Mailing Address:

FEI Number: 13-1493710

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: P ( ) Delete  
Name: FUDGE, ANN  
Address: 285 MADISON AVENUE  
City-St-Zip: NEW YORK, NY 10017

Title: T ( ) Delete  
Name: LAW-GISIKO, PETER  
Address: 285 MADISON AVENUE  
City-St-Zip: NEW YORK, NY 10017

Title: SD ( ) Delete  
Name: HOWE, MARY ELLEN  
Address: 125 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10017

Title: VD ( ) Delete  
Name: NEUMAN, THOMAS O  
Address: 125 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10017

Title: CD ( ) Delete  
Name: SORRELL, MARTIN S SIR  
Address: 125 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10017

Title: D ( ) Delete  
Name: RICHARDSON, PAUL W.G.  
Address: 125 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10017

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: STRINGHAM, PETER  
Address: 285 MADISON AVENUE  
City-St-Zip: NEW YORK, NY 10017

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS O NEUMAN

SVP

03/21/2007

Electronic Signature of Signing Officer or Director

Date