

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90311 042 ***150.00

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1. Entity Name

CONVERGYS CUSTOMER MANAGEMENT GROUP INC.



Principal Place of Business

201 E. FOURTH ST.
CINCINNATI, OH 45202

Mailing Address

201 E. FOURTH ST.
CINCINNATI, OH 45202

50043909



04012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
31-1260729

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

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, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME ORR, JAMES F
STREET ADDRESS 201 E. 4TH ST.
CITY-ST-ZIP CINCINNATI, OH 45202

TITLE P
NAME FREKER, JOHN C
STREET ADDRESS 201 E. 4TH ST.
CITY-ST-ZIP CINCINNATI, OH 45202

TITLE S
NAME CLINE, CLAUDIA L
STREET ADDRESS 201 E FOURTH ST
CITY-ST-ZIP CINCINNATI, OH 45202

TITLE T
NAME VALENTINA, ANDRE
STREET ADDRESS 201 E FOURTH ST
CITY-ST-ZIP CINCINNATI, OH 45202

TITLE AT
NAME GARTNER, MARK J
STREET ADDRESS 201 E FOURTH ST RM 102-1960
CITY-ST-ZIP CINCINNATI, OH 45202

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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:

Mark J Gartner **MARK J GARTNER**

4-4-05
Date

513-723-8949
Daytime Phone #