

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004679

FILED
Jan 04, 2012
Secretary of State

Entity Name: RIVERSIDE RESEARCH INSTITUTE, CORPORATION

Current Principal Place of Business:

156 WILLIAM STREET
9TH FLOOR
NEW YORK, NY 100382609

New Principal Place of Business:

Current Mailing Address:

156 WILLIAM STREET
9TH FLOOR
NEW YORK, NY 100382609

New Mailing Address:

FEI Number: 13-2593244

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

OFFICERS AND DIRECTORS:

Title: CTR
Name: PITTS, THOMAS G
Address: PO BOX 322
City-St-Zip: QUECHEE, VT 05059

Title: TR
Name: COYNE, VINCENT J
Address: 8489 CLARK MILLS ROAD
City-St-Zip: WHITESBORO, NY 13492

Title: TR
Name: SELDIN, LESLIE W
Address: 15 CHESTER STREET
City-St-Zip: BROOKFIELD, CT 06804

Title: S
Name: RASKIN, ROSLYN
Address: 45 WEST 60TH STREET #16A
City-St-Zip: NEW YORK, NY 10023

Title: PTR
Name: ANNAS, RICHARD G
Address: 534 SUGARBROOK TRAIL
City-St-Zip: BELLBROOK, OH 45305

Title: T
Name: GREENWALD, RICHARD
Address: 5 MARA ROAD
City-St-Zip: HUNTINGTON STATION, NY 11746

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROSLYN RASKIN

SEC

01/04/2012

Electronic Signature of Signing Officer or Director

Date