

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000001828

Entity Name: IPSOS QUALITATIVE, LLC

FILED  
May 09, 2011  
Secretary of State

**Current Principal Place of Business:**

615 ELSINORE PLACE  
CINCINATTI, OH 45202

**New Principal Place of Business:**

3505 COLUMBIA PARKWAY, SUITE 300  
CINCINATTI, OH 45226

**Current Mailing Address:**

615 ELSINORE PLACE  
CINCINATTI, OH 45202

**New Mailing Address:**

1271 AVENUE OF THE AMERICAS, 15TH FLOOR  
NEW YORK, NY 10020

FEI Number: 20-3679206

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: TRUCHOT, DIDIER  
Address: 35 RUE DU VAL DE MARNE  
City-St-Zip: PARIS, PA 75013 FR

Title: MGR  
Name: HARDING, CARLOS  
Address: 35 RUE DU VAL DE MARNE  
City-St-Zip: PARIS, PA 75013 FR

Title: MGR  
Name: SMITH, JAMES T  
Address: 1271 AVENUE OF THE AMERICAS, 15TH FLOOR  
City-St-Zip: NEW YORK, NY 10020 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAMES T. SMITH

VP

05/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date