

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P39212

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** KROLL ASSOCIATES, INC.

**Current Principal Place of Business:**

1166 AVE. OF THE AMERICAS  
NEW YORK, NY 10036

**New Principal Place of Business:**

**Current Mailing Address:**

1166 AVE. OF THE AMERICAS  
NEW YORK, NY 10036

**New Mailing Address:**

**FEI Number:** 11-2286880

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: PDS  
Name: PEREL, SABRINA H  
Address: 1166 AVE. OF THE AMERICAS  
City-St-Zip: NEW YORK, NY 10036

Title: VPT  
Name: KARSON, DANIEL E  
Address: 1166 AVE. OF THE AMERICAS  
City-St-Zip: NEW YORK, NY 10036

Title: D  
Name: CHERASKY, MICHAEL  
Address: SUITE 1100 7799 LEESBURG PIKE  
City-St-Zip: FALLS CHURCH, VA 22043

Title: D  
Name: CAMPBELL, JEFFREY  
Address: SUITE 1100 7799 LEESBURGH PIKE  
City-St-Zip: FALLS CHURCH, VA 22043

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

SIGNATURE: SABRINA H. PEREL

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04/27/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date