

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P40763

FILED  
Feb 19, 2002 8:00 AM  
Secretary of State

Entity Name: NATIONAL CORPORATE RESEARCH, LTD., INC.

**Current Principal Place of Business:**

1406 HAYS ST., STE. #2  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

1406 HAYS ST., STE. #2  
TALLAHASSEE, FL 32301

**New Mailing Address:**

FEI Number: 13-3246732      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PARALEGAL AND ATTORNEY SERVICE BUREAU, INC  
1406 HAYS STREET, SUITE 2  
TALLAHASSEE, FL 32301      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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: WAGNER, HOWARD,  
Address: 225 W. 34TH STREET, STE. 910  
City-St-Zip: NEW YORK, NY 10122

Title: DVPS ( ) Delete  
Name: WAGNER, JOAN,  
Address: 225 W. 34TH STREET, STE. 910  
City-St-Zip: NEW YORK, NY 10122

Title: VP ( ) Delete  
Name: JACOBI, BRUCE,  
Address: 225 W. 34TH STREET, STE. 910  
City-St-Zip: NEW YORK, NY 10122

Title: AVP ( ) Delete  
Name: MORRISSEY, JOHN  
Address: 225 WEST 34TH STREET, SUITE 910  
City-St-Zip: NEW YORK, NY 10122

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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 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: JOHN MORRISSEY

AVP

02/19/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date