#### 2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002902

Entity Name: PACIFIC INSTITUTE FOR RESEARCH AND EVALUATION, INC.

FILED
Jan 24, 2014
Secretary of State
CC8623134983

# **Current Principal Place of Business:**

11720 BELTSVILLE DRIVE

SUITE 900

BELTSVILLE, MD 20705-3111

### **Current Mailing Address:**

11720 BELTSVILLE DRIVE

SUITE 900

BELTSVILLE, MD 20705-3111 US

FEI Number: 94-2243283 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC. 155 OFFICE PLAZA DRIVE TALLAHASSEE, FL 32301 US

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:

Address

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title CEO Title CFO

Name MURPHY, BERNARD PHD Name KLIG, GARY

Address 11720 BELTSVILLE DRIVE Address 11720 BELTSVILLE DRIVE

SUITE 900

City-State-Zip: BELTSVILLE MD 20705-3111

Title DIRE

Name CALHOUN, FAYE
Name WILLIAMS, DIANE

Address 11720 BELTSVILLE DRIVE

Address 11720 BELTSVILLE DRIVE

City-State-Zip: BELTSVILLE MD 20705

City-State-Zip: BELTSVILLE MD 20705-3111

Title DIRE

Name O'NEILL, BRIAN
Address 11720 BELTSVILLE DRIVE

City-State-Zip: BELTSVILLE MD 20705

Title DIRECTOR

Title DIRECTOR Name GORDON, MARY

Name CLAYTON, RICHARD PHD Address 11720 BELTSVILLE DRIVE

11720 BELTSVILLE DR., STE 900 SUITE 900

City-State-Zip: BELTSVILLE MD 20705-3111 City-State-Zip: BELTSVILLE MD 20705-3111

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City-State-Zip:

BELTSVILLE MD 20705

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: GARY KLIG CFO 01/24/2014

### Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name HALLFORS, DENISE Name SALTZ, ROBERT PHD

Address 11720 BELTSVILLE DRIVE Address 11720 BELTSVILLE DRIVE

SUITE 900 SUITE 900

City-State-Zip: BELTSVILLE MD 20705-3111 City-State-Zip: BELTSVILLE MD 20705-3111

Title VC Title DIRECTOR

NameGOLD, ROBERT PHDNameMAXWELL, JANE C PHDAddress11720 BELTSVILLE DRIVEAddress11720 BELTSVILLE DR.

SUITE 900 STE 900

City-State-Zip: BELTSVILLE MD 20705-3111 City-State-Zip: BELTSVILLE MD 20705-3111

Title DIRECTOR Title DIRECTOR

Name ROMANO, EDUARDO PHD Name ERIKSON, MICHAEL SC.D.

Address 11720 BELTSVILLE DRIVE Address 11720 BELTSVILLE DRIVE

SUITE 900 SUITE 900

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