

2020 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F00000003464

Entity Name: UMR, INC.**Current Principal Place of Business:**11 SCOTT STREET
WAUSAU, WI 54403**Current Mailing Address:**11 SCOTT STREET
WAUSAU, WI 54403 US**FEI Number:** 39-1995276**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name HOGAN, SCOTT WILLIAM
Address 11 SCOTT STREET
City-State-Zip: WAUSAU WI 54403

Title ASSISTANT SECRETARY
Name ZUBA, JESSICA LEIGH
Address 11 SCOTT STREET
City-State-Zip: WAUSAU WI 54403

Title ASSISTANT SECRETARY
Name LANG, HEATHER ANASTASIA
Address 11 SCOTT STREET
City-State-Zip: WAUSAU WI 54403

Title SECRETARY
Name HIATT, KIMBERLY MARIE
Address 11 SCOTT STREET
City-State-Zip: WAUSAU WI 54403

Title CFO
Name CZECH, BRUCE PAUL
Address 11 SCOTT STREET
City-State-Zip: WAUSAU WI 54403

Title DIRECTOR
Name CZECH, BRUCE PAUL
Address 11 SCOTT STREET
City-State-Zip: WAUSAU WI 54403

Title TREASURER
Name GILL, PETER MARSHALL
Address 11 SCOTT STREET
City-State-Zip: WAUSAU WI 54403

Title PRESIDENT
Name HOGAN, SCOTT WILLIAM
Address 11 SCOTT STREET
City-State-Zip: WAUSAU WI 54403

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: HEATHER ANASTASIA LANG**ASSISTANT SECRETARY** 08/25/2020

Electronic Signature of Signing Officer/Director Detail

Date