

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003464

Entity Name: UMR, INC.**Current Principal Place of Business:**115 W. WAUSAU AVENUE
WAUSAU, WI 54401**Current Mailing Address:**115 W. WAUSAU AVENUE
WAUSAU, WI 54401 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	115 W. WAUSAU AVENUE
City-State-Zip:	WAUSAU WI 54401

Title	SECRETARY
Name	HIATT, KIMBERLY MARIE
Address	115 W. WAUSAU AVENUE
City-State-Zip:	WAUSAU WI 54401

Title	DIRECTOR
Name	CZECH, BRUCE PAUL
Address	115 W. WAUSAU AVENUE
City-State-Zip:	WAUSAU WI 54401

Title	TREASURER
Name	GILL, PETER MARSHALL
Address	115 W. WAUSAU AVENUE
City-State-Zip:	WAUSAU WI 54401

Title	PRESIDENT
Name	HOGAN, SCOTT WILLIAM
Address	115 W. WAUSAU AVENUE
City-State-Zip:	WAUSAU WI 54401

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** 04/24/2021_____
Electronic Signature of Signing Officer/Director Detail_____
Date