

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2002 8:00 am
Secretary of State

02-03-2002 90003 002 ***150.00

DOCUMENT # 824539

1. Entity Name
GUY CARPENTER & COMPANY

Principal Place of Business
ATTN. JILL G. OLONOFF
TWO WORLD TRADE CENTER
NEW YORK NY 10048

Mailing Address
ATTN. JILL G. OLONOFF
TWO WORLD TRADE CENTER
NEW YORK NY 10048



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Co DANNY WONG

Suite, Apt. #, etc.
114 WEST 47TH STREET

City & State
NEW YORK NY

Zip
10036

Country
U.S.

3. Mailing Address
Co DANNY WONG

Suite, Apt. #, etc.
114 WEST 47TH STREET

City & State
NEW YORK NY

Zip
10036

Country
U.S.

4. FEI Number **13-4985720**
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

| 11. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SVP OLONOFF, JILL G. % 2 WORLD TRADE CENTER NEW YORK NY <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SVP CADY, MICHAEL S. % 2 WORLD TRADE CENTER NEW YORK NY <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP WONG, DANNY % TWO WORLD TRADE CENTER NEW YORK NY 10048 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |

| 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MANAGING DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 114 WEST 47TH STREET NEW YORK NY 10036 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MANAGING DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 114 WEST 47TH STREET NEW YORK NY 10036 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 114 WEST 47TH STREET NEW YORK NY 10036 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Danny Wong Date: 1/17/02 Daytime Phone #: (212) 323-1172
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)