

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 06, 2004 8:00 am**  
**Secretary of State**

05-06-2004 90179 016 \*\*\*150.00

|                                                                 |                                                                                   |
|-----------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # 851221</b>                                        |  |
| <b>1. Entity Name</b><br>MERCER HUMAN RESOURCE CONSULTING, INC. |                                                                                   |

|                                                                                                              |                                                                                                        |
|--------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| <b>Principal Place of Business</b><br>1166 AVE. OF THE AMERICAS<br>TAX DEPT. 30 FL<br>NEW YORK NY 10036-2708 | <b>Mailing Address</b><br>1166 AVE. OF THE AMERICAS<br>TAX DEPT. 30 FL<br>NEW YORK NY 10036-2708<br>US |
|--------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|

|                                        |                                                                                           |
|----------------------------------------|-------------------------------------------------------------------------------------------|
| <b>2. Principal Place of Business</b>  | <b>3. Mailing Address</b><br>121 RIVER STREET<br>SUITE, APT. #, etc.<br>5TH FL. TAX DEPT. |
| <b>City &amp; State</b><br>HOBOKEN, NJ | <b>City &amp; State</b><br>HOBOKEN, NJ                                                    |
| <b>Zip</b><br>07030                    | <b>Country</b><br>U.S.A.                                                                  |



MOORE CR2E034 (11/03)

|                                                                                                                                    |                                                                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| <b>6. Name and Address of Current Registered Agent</b><br>CT CORPORATION SYSTEM<br>1200 S. PINE ISLAND ROAD<br>PLANTATION FL 33324 | <b>7. Name and Address of New Registered Agent</b><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>FL Zip Code |
|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|

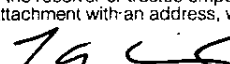
**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE** \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) **DATE** \_\_\_\_\_

|                                                                                                                                                 |                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2004 Fee will be \$550.00</b><br><b>Make Check Payable to Florida Department of State</b> | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|

| 10. OFFICERS AND DIRECTORS                           |                                            | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |                                                                              |
|------------------------------------------------------|--------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------|
| <b>TITLE</b><br>CFOD                                 | <input type="checkbox"/> Delete            | <b>TITLE</b>                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>NAME</b><br>MOHAN, P RAM                          |                                            | <b>NAME</b>                                           |                                                                              |
| <b>STREET ADDRESS</b><br>1166 AVENUE OF THE AMERICAS |                                            | <b>STREET ADDRESS</b>                                 |                                                                              |
| <b>CITY-ST-ZIP</b><br>NEW YORK NY                    |                                            | <b>CITY-ST-ZIP</b>                                    |                                                                              |
| <b>TITLE</b><br>D                                    | <input type="checkbox"/> Delete            | <b>TITLE</b>                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>NAME</b><br>LYNCH, TIMOTHY J.                     |                                            | <b>NAME</b>                                           |                                                                              |
| <b>STREET ADDRESS</b><br>1166 AVE OF THE AMERICAS    |                                            | <b>STREET ADDRESS</b>                                 |                                                                              |
| <b>CITY-ST-ZIP</b><br>NEW YORK NY                    |                                            | <b>CITY-ST-ZIP</b>                                    |                                                                              |
| <b>TITLE</b><br>D                                    | <input type="checkbox"/> Delete            | <b>TITLE</b>                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>NAME</b><br>MAHENDROO, VIKESH                     |                                            | <b>NAME</b>                                           |                                                                              |
| <b>STREET ADDRESS</b><br>1166 AVE OF THE AMERICAS    |                                            | <b>STREET ADDRESS</b>                                 |                                                                              |
| <b>CITY-ST-ZIP</b><br>NEW YORK NY                    |                                            | <b>CITY-ST-ZIP</b>                                    |                                                                              |
| <b>TITLE</b><br>CEOC                                 | <input type="checkbox"/> Delete            | <b>TITLE</b>                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>NAME</b><br>MCCAW, DANIEL                         |                                            | <b>NAME</b>                                           |                                                                              |
| <b>STREET ADDRESS</b><br>1166 AVENUE OF THE AMERICAS |                                            | <b>STREET ADDRESS</b>                                 |                                                                              |
| <b>CITY-ST-ZIP</b><br>NEW YORK NY 10036              |                                            | <b>CITY-ST-ZIP</b>                                    |                                                                              |
| <b>TITLE</b><br>S                                    | <input type="checkbox"/> Delete            | <b>TITLE</b>                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>NAME</b><br>FAGAN, WILLIAM C.                     |                                            | <b>NAME</b>                                           |                                                                              |
| <b>STREET ADDRESS</b><br>1166 AVE OF THE AMERICAS    |                                            | <b>STREET ADDRESS</b>                                 |                                                                              |
| <b>CITY-ST-ZIP</b><br>NEW YORK NY                    |                                            | <b>CITY-ST-ZIP</b>                                    |                                                                              |
| <b>TITLE</b><br>AT                                   | <input checked="" type="checkbox"/> Delete | <b>TITLE</b>                                          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| <b>NAME</b><br>BLAUVELT, JOHN D.                     |                                            | <b>NAME</b><br>AT<br>FRANK A. CAMMAROTO               |                                                                              |
| <b>STREET ADDRESS</b><br>2 WORLD TRADE CENTER        |                                            | <b>STREET ADDRESS</b><br>121 RIVER ST.                |                                                                              |
| <b>CITY-ST-ZIP</b><br>NY NY 10048                    |                                            | <b>CITY-ST-ZIP</b><br>HOBOKEN, NJ 07030               |                                                                              |

**12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**  **FRANK A. CAMMAROTO** **4/27/04** **(201) 284-4787**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment 851221  
24072091  
**MERCER HUMAN RESOURCE CONSULTING, INC.**  
(Delaware)  
**Incorporated July 9, 1975**

**Officers:**

| <u>Name</u>                   | <u>Title</u>                         | <u>Business Address</u>                           |
|-------------------------------|--------------------------------------|---------------------------------------------------|
| Daniel L. McCaw               | Chairman/Chief<br>Executive Officer  | 1166 Avenue of the Americas<br>New York, NY 10036 |
| Karen B. Greenbaum            | President/Chief<br>Operating Officer | 1166 Avenue of the Americas<br>New York, NY 10036 |
| P. Ram Mohan                  | Chief Financial Officer              | 1166 Avenue of the Americas<br>New York, NY 10036 |
| Patricia M. Daniels           | Chief HR Officer                     | 1166 Avenue of the Americas<br>New York, NY 10036 |
| Edward F. Fenton, Jr.         | Chief IT Officer                     | 462 South Fourth Ave.<br>Louisville, KY 40202     |
| William C. Fagan              | Secretary                            | 1166 Avenue of the Americas<br>New York, NY 10036 |
| Leonard F. DiNapoli, Jr.      | Assistant Secretary                  | 1166 Avenue of the Americas<br>New York, NY 10036 |
| Ziporah Janowski              | Assistant Secretary                  | 1166 Avenue of the Americas<br>New York, NY 10036 |
| Daniel L. Percella            | Treasurer                            | 121 River Street<br>Hoboken, NJ 07030             |
| <del>Frank A. Cammaroto</del> | <del>Assistant Treasurer</del>       | <del>121 River Street<br/>Hoboken, NJ 07030</del> |
| Raymond A. Kottak             | Assistant Treasurer                  | 462 South Fourth Avenue<br>Louisville, KY 40202   |
| Jeffrey A. Knee               | Assistant Treasurer                  | 121 River Street<br>Hoboken, NJ 07030             |
| Bruce Willman                 | Assistant Treasurer                  | 121 River Street<br>Hoboken, NJ 07030             |
| Thomas O'Keefe                | Assistant Treasurer                  | 1166 Avenue of the Americas<br>New York, NY 10036 |

Attachment 851221

24672091

**MERCER HUMAN RESOURCE CONSULTING, INC.**

**(Delaware)**

**Incorporated July 9, 1975**

**Directors (Continued):**

**Name**

**Business Address**

Giles Archibald

1166 Avenue of the Americas  
New York, NY 10036

Mark I. Brandes

1166 Avenue of the Americas  
New York, NY 10036

Stephen C. Carlson

10 South Wacker Drive  
Suite 1700  
Chicago, IL 60606

Patricia M. Daniels

1166 Avenue of the Americas  
New York, NY 10036

Douglas C. Davis

1166 Avenue of the Americas  
New York, NY 10036

Edward F. Fenton, Jr.

462 South Fourth Ave.  
Louisville, KY 40202

Roy A. Gonella

777 South Figueroa St.  
Los Angeles, CA 90017

Karen B. Greenbaum

1166 Avenue of the Americas  
New York, NY 10036

Paul D. Kohlenbrener

10 South Wacker Drive  
Suite 1700  
Chicago, IL 60606

Daniel L. McCaw

1166 Avenue of the Americas  
New York, NY 10036

Barry McInerney

1166 Avenue of the Americas  
New York, NY 10036

P. Ram Mohan

1166 Avenue of the Americas  
New York, NY 10036

Attachment 851221

24070091

**MERCER HUMAN RESOURCE CONSULTING, INC.**

**(Delaware)**

**Incorporated July 9, 1975**

**Directors (Continued):**

**Name**

Larry E. North

**Business Address**

3700 Georgia-Pacific Center  
133 Peachtree Street, NE  
Atlanta, GA 30303

Robert V. O'Brien, Jr.

One Union Square  
600 University Street  
Suite 3200  
Seattle, WA 98101

Lea L. Peterson

200 Clarendon Street  
Boston, MA 02116

Timothy P. Ridge

10 South Wacker St.  
Suite 1700  
Chicago, IL 60606

Robert J. Schuetz

One PPG Place 27th Fl.  
Pittsburgh, PA 15222

Charles T. Scott

1717 Arch Street 27th Fl.  
Philadelphia, PA 19103

Susan J. Kilrain

200 Clarendon Street  
Boston, MA 02116