

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001312

Entity Name: JURAN INSTITUTE, INC.

FILED  
Jan 26, 2006  
Secretary of State

## Current Principal Place of Business:

555 HERITAGE RD, SUITE 100  
SOUTHURY, CT 06488

## New Principal Place of Business:

555 HERITAGE RD, SUITE 100  
SUITE 100  
SOUTHURY, CT 06488

## Current Mailing Address:

555 HERITAGE ROAD, SUITE 100  
SOUTHURY, CT 06488

## New Mailing Address:

555 HERITAGE ROAD, SUITE 100  
SUITE 100  
SOUTHURY, CT 06488

FEI Number: 13-2982872

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JONES, FRANK  
Address: 4 MCCREA LANE  
City-St-Zip: DARIEN, CT 06820

Title: D ( ) Delete  
Name: JURAN, JOSEPH M  
Address: 3306 THEALL ROAD  
City-St-Zip: RYE, NY 10580

Title: D ( ) Delete  
Name: JURAN, CHARLES E  
Address: 8186 RED OAK ROAD  
City-St-Zip: PRESCOTT, AZ

Title: D ( ) Delete  
Name: DEFE0, JOSEPH A  
Address: 555 HERITAGE ROAD, SUITE 100  
City-St-Zip: SOUTHURY, CT 06488

Title: S ( ) Delete  
Name: BOMBACI, WAYNE O  
Address: 555 HERITAGE ROAD  
City-St-Zip: SOUTHURY, CT 06488

Title: D ( ) Delete  
Name: BLUESTEIN, DAVID G  
Address: 25 WILD TURKEY COURT  
City-St-Zip: RIDGEWOOD, CT 06866

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT E. WILSON

VP

01/26/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date