

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F94000001312

FILED
Jan 06, 2003
Secretary of State

Entity Name: JURAN INSTITUTE, INC.

Current Principal Place of Business:

115 OLD RIDGEFIELD RD
WILTON, CT 068970811

New Principal Place of Business:

Current Mailing Address:

PO BOX 811
WILTON, CT 068970811

New Mailing Address:

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.
103 N. MERIDIAN STREET
TALLAHASSEE, FL 323010000 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: GODFREY, BLANTON A
Address: 92 KEELERS RIDGE
City-St-Zip: WILTON, CT 06897

Title: D () Delete
Name: JURAN, JOSEPH M
Address: 115 OLD RIDGEFIELD RD
City-St-Zip: WILTON, CT 068970811

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

Title: D () Delete
Name: DEFEQ, JOSEPH A
Address: 115 OLD RIDGEFIELD RD
City-St-Zip: WILTON, CT 068970811

Title: S () Delete
Name: WILSON, ROBERT E
Address: 115 OL DRIDGEFIELD RD
City-St-Zip: WILTON, CT 068970811

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
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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 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 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

S

01/06/2003

Electronic Signature of Signing Officer or Director

_____ Date

W. FRANK JONES, DIRECTOR
4 MCCREA LANE
DARIEN, CT 06820

JOSEPH E. DEFEO, PRESIDENT
115 OLD RIDGEFIELD ROAD
WILTON, CT 06897