

SCC eFile

**2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

213549076

1.) CORPORATION NAME:

COLLEGE ENTRANCE EXAMINATION BOARD

DUE DATE: **11/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**C T CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1263328**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 45 COLUMBUS AVE

CITY/ST/ZIP: NEW YORK, NY 10023-6992

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	DAVID COLEMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	45 COLUMBUS AVE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10023-6992		

NAME:	THOMAS M HIGGINS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP/CFO		
ADDRESS:	45 COLUMBUS AVE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10023-6992		

NAME:	STEVEN TITAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	45 COLUMBUS AVE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10023		

NAME:	JEREMY SINGER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	COO		
ADDRESS:	45 COLUMBUS AVE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10023		

NAME:	DOROTHY SEXTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	45 COLUMBUS AVE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10023-6992		

NAME:	NEIL LANE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, GEN. COUNSEL		
ADDRESS:	45 COLUMBUS AVENUE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10023		

NAME: MAGHAN KEITA TITLE: CHAIRMAN ADDRESS: 45 COLUMBUS AVENUE CITY/ST/ZIP/CO: NEW YORK, NY 10023	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: SHIRLEY ORT TITLE: VICE CHAIRMAN ADDRESS: 45 COLUMBUS AVENUE CITY/ST/ZIP/CO: NEW YORK, NY 10023	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ STEVEN TITAN	STEVEN TITAN, TREASURER	10/22/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.