2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State
02-19-2002 90002 020 ***150.00

DOCUMENT # F96000004932

1. Entity Name
PRIMEDIA SPECIALTY GROUP, INC.

Principal Place of Business	Mailing Address
227 WEST MONROE. STE 4200 CHICAGO IL 60606	6420 WILSHIRE BLVD. ATTN:MS. MEL MANGUERA LOS ANGELES CA 90048

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 36-4099296 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324	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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO BAILLIE, JOHN 6420 WILSHIRE BLVD. LOS ANGELES CA 90048	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT CHARLES MCCURDY 745 5th AVE NEW YORK, NY 10151	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCO MOLONEY, TOM 6420 WILSHIRE BLVD. LOS ANGELES CA 90048	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ASST SECRETARY & VICE PRES CHRISTOPHER FRASER 745 5th AVE NEW YORK NY 10151	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO HUGHES, GARY 1 LINCOLN COURT PETERBOROUGH UK PE1- 2RF	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER MATTHEW FLYNN 745 5th AVE NEW YORK NY 10151	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAND, KEVIN 6042 WILSHIRE BLVD. LOS ANGELES FL 90048	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR & CHAIRMAN THOMAS ROGERS 745 5th AVE NEW YORK, NY 10151	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICH, MARCUS 110 FIFTH AVE NEW YORK NY 10011	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR BEVERLY CHELL 745 5th AVE NEW YORK NY 10151	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PARR, STEVE 2 MAGNOLIA COURT MORRISTOWN NJ 07960	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/01)

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: Matthew Flynn MATTHEW FLYNN 1/24/02 (212) 745-0100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #