

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90043 001 ***150.00

ASTRON AT

DOCUMENT # F99000000274

1. Entity Name
PRIMEDIA SPECIAL INTEREST PUBLICATIONS INC.

Principal Place of Business 745 FIFTH AVENUE NEW YORK NY 10151 US	Mailing Address 745 FIFTH AVENUE NEW YORK NY 10151 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 52-1654079	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 526 E. PARK AVENUE TALLAHASSEE FL 32301	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 N/A (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. <input type="checkbox"/>	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. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC ROGERS, THOMAS S 48 BILTMORE AVENUE RYE NY 10580 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CHELL, BEVERLY C 21 BLUEWATER HILL WESTPORT CT 06880 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCURDY, CHARLES G 1158 FIFTH AVENUE NEW YORK NY 10029 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COLODNY, MARK 59 EAST 92ND STREET NEW YORK NY 10128 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DISCEPLO, MICHAEL C 46 WOLF HILL ROAD MELVILLE NY 11747 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAGGIO, DOMENIC 4 MARTINE AVENUE WHITE PLAINS NY 10606 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment
#F990000000274

325450

PRIMEDIA
Magazine & Internet Group

6405 Flank Drive, Harrisburg, PA 17112
Telephone 717 657-9555
Facsimile
Accounts Payable 717 671-4328
Accounts Receivable 717 671-4348
Advertising 717 540-6706
Classified Advertising 717 671-4346
Graphic Design 717 671-4322
Human Resources 717 657-1139
IT 717 657-9526
Market Research 717 540-4767
Prepress 717 657-9552
Production 717 540-4767
Products 717 540-6727

January 18, 2002

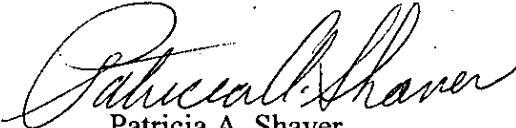
Secretary of State- Florida
Division of Corporations
PO Box 6327
Tallahassee FL 32314

Dear Sir or Madam:

Enclosed you will find the completed and executed 2002 Uniform Business Report and our check in the amount of \$150.00 to cover the Annual Fee for Primedia Special Interest Publications, Inc. in the state of Florida for the year 2002.

If there are any problems with this submission or you have any questions or need additional information, please contact me by phone at 717-540-6600, fax 717-671-4307 or email "www.pats@cowles.com".

Sincerely,


Patricia A. Shaver
Contract Administrator