2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2000 8:00 am
Secretary of State
04-28-2000 90078 024 ***150.00

DOCUMENT # F99000001823

1. Entity Name

ACCESS INTEGRATED NETWORKS, INC.

838627

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
NORTH CREST BLVD. GA 31210	121 NORTH CREST BLVD. MACON GA 31210-1845

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 58-2233012 ☐ 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
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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, 2000 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	PD WRIGHT, WILLIAM T 777 WILL SCARLET WAY MACON GA	☐ Delete	P/C/D Wright, William T 777 Will Scarlet Way Macon, GA 31220	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS FORBES, GEORGE 1049 UNDERWOOD DR. MACON GA	☐ Delete	V Forbes, George L 1049 Underwood Dr Macon, GA 31210	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SMITH, RANDY 122 WOLF CREEK DR. MACON GA	☐ Delete	D Croft, Edward S. III 500 Argonne Dr. NW Atlanta, GA 30305	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROWLAND, WARREN RT 3 HOUSER MILL RD BRYON GA	☐ Delete	V/T Smith, Michael 238 Pebblebrook Lane Macon, GA 31220	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DYER, DAVID 350 RIVERDALE RD. MACON GA	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PAGE, RODNEY 1224 CRAWFORD RD BARNESVILLE GA	☐ Delete	V/D/S Page, Rodney 1224 Crawford Rd. Barnesville, GA 30204	☒ Change ☐ Addition

CR2E034 (9/99)

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: _____ 01-05-00 912-475-9800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #