FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Feb 27, 2001 8:00 am **DOCUMENT # P34054 Secretary of State** 1. Entity Name AMERICAN COLOR GRAPHICS, INC. (NEW YORK) 02-27-2001 90348 027 ***150.00 Principal Place of Business Mailing Address 225 HIGHRIDGE RD 100 WINNERS CIRCLE STAMFORD CT 06905 BRENTWOOD TN 37027 815023 2. Principal Place of Business 3. Mailing Address 45le Street Main Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 16-1003976 Kidaetheld Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired OG 877 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. CR2E034 (10/00) ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME FRY, ERIC T. STREET ADDRESS STREET ADDRESS 1221 AVE OF THE AMERICAS 33RD FL CITY-ST-ZIP CITY-ST-7IP <u>NEW YORK NY</u> ☐ Change TITLE ☐ Delete TITLE Addition JANSON, MICHAEL M NAME NAME STREET ADDRESS STREET ADDRESS 1221 AVE OF THE AMERICAS 33RD FLOOR CITY - ST = ZIP CITY-ST-ZIP NEW_YORK NY ☐ Delete TITLE TITLE Change Addition Milara, Joseph M. NAME MILANO, JOSEPH M NAME 456 Main street STREET ADDRESS STREET ADDRESS 225 HIGH RIDGE ROAD Ridgefield, CT 06877 CITY-ST-ZIP CITY-ST-ZIP STAMFORD CT C/P/CEO Change Addition TITLE CPCE ☐ Delete TITLE Dyott, Stephen M. NAME STEPHEN M DYOTT NAME use main street STREET ADDRESS 225 HIGH RIDGE ROAD STREET ADDRESS Ridgefield, CT 06877 CITY-ST-ZIP CITY-ST-ZIP STAMFORD CT TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME ROYCE, DENISE D NAME STREET ADDRESS STREET ADDRESS 100 WINNERS CIRCLE CITY-ST-ZIP CITY-ST-ZIP **BRENTWOOD TN** TITLE ☐ Delete TITLE Change ☐ Addition S Davis, Timothy M. 456 Main Street Ridgefield, CT 00877

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

DAVIS, TIMOTHY M.

225 HIGH RIDGE RD

STAMFORD CT

NAME

STREET ADDRESS

CITY-ST-ZIP

KO GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Denise D. Royce