2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 326154

Jan 02, 2003 Secretary of State

FILED

Entity Name: ACCESS CONTROL TECHNOLOGIES, INC.

Current Principal Place of Business: New Principal Place of Business:

1028 W. WASHINGTON P.O. BOX 550190 ORLANDO, FL 328051647 US

Current Mailing Address: New Mailing Address:

1028 W. WASHINGTON P.O. BOX 550190 ORLANDO, FL 328051647 US

FEI Number: 59-1204532 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KNARREBORG, MICHAEL R
1028 W. WASHINGTON ST.
ORLANDO, FL 32805

KNARREBORG, MICHAEL R PRES
1028 W. WASHINGTON ST.
ORLANDO, FL 32805

ORLANDO, FL 32805

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: MICHAEL R. KNARREBORG 01/02/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition KNARREBORG, ROBERT C, LOWERY, DANIEL A VICE PR Name: Name: 1028 W. WASHINGTON 1028 W. WASHINGTON Address: Address: City-St-Zip: ORLANDO, FL City-St-Zip: ORLANDO, FL 32805

Title: P () Delete Title: () Change () Addition

 Name:
 KNARREBORG, MICHAEL R
 Name:

 Address:
 1028 W. WASHINGTON
 Address:

 City-St-Zip:
 ORLANDO, FL 32805
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 LOWERY, KATHY
 Name:

 Address:
 1028 W. WASHINGTON
 Address:

 City-St-Zip:
 ORLANDO, FL 32805
 City-St-Zip:

Title: () Delete Title: (X) Change () Addition SANISLOW, WM A, KNARREBORG, MICHAEL R T Name: Name: Address: 1028 W. WASHINGTON Address: 1028 W. WASHINGTON City-St-Zip: City-St-Zip: ORLANDO, FL ORLANDO, FL 32805

Title: T (X) Delete Title: () Change () Addition

 Name:
 KNARREBORG, MICHAEL R
 Name:

 Address:
 1028 W. WASHINGTON ST.
 Address:

 City-St-Zip:
 ORLANDO, FL 32805
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHY M. LOWERY S 01/02/2003