

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000006641

FILED
Mar 28, 2002 8:00 AM
Secretary of State

Entity Name: ACCESS AMENITIES, INC.

Current Principal Place of Business:

2 N. RIVERSIDE PLAZA, #1600
C/O ANN SCHNEIDER
CHICAGO, IL 60606

New Principal Place of Business:

Current Mailing Address:

2 N. RIVERSIDE PLAZA, #1600
C/O ANN SCHNEIDER
CHICAGO, IL 60606

New Mailing Address:

FEI Number: 36-4367655 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEXIS DOCUMENT SERVICES INC
3953 W.W. KELLY ROAD
TALLAHASSEE, FL 32311 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CALLAHAN, TIMOTHY H
Address: 2 N. RIVERSIDE PLAZA, #1600
City-St-Zip: CHICAGO, IL 60606

Title: DVT () Delete
Name: KINCAID, RICHARD D
Address: 2 N. RIVERSIDE PLAZA, #1600
City-St-Zip: CHICAGO, IL 60606

Title: DVS () Delete
Name: STEVENS, STANLEY M
Address: 2 N. RIVERSIDE PLAZA, #1600
City-St-Zip: CHICAGO, IL 60606

Title: V () Delete
Name: HELFAND, DAVID
Address: 2 N. RIVERSIDE PLAZA, #1600
City-St-Zip: CHICAGO, IL 60606

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: KINCAID, RICHARD D
Address: 2 N. RIVERSIDE PLAZA, #1600
City-St-Zip: CHICAGO, IL 60606

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V () Change (X) Addition
Name: KENEVAN, BROOKE
Address: 2 N. RIVERSIDE PLAZA, #1600
City-St-Zip: CHICAGO, IL 60606

Title: T () Change (X) Addition
Name: FEAR, MAUREEN O
Address: 2 N. RIVERSIDE PLAZA, #1600
City-St-Zip: CHICAGO, IL 60606

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: BROOKE KENEVAN

VP

03/28/2002

Electronic Signature of Signing Officer or Director

_____ Date