2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2005
Secretary of State

DOCUMENT# F04000005485

Entity Name: ACCESS ADMINISTRATORS, INC.

Current Principal Place of Business:

7100 WESTWIND, SUITE 115
EL PASO, TX 79912

New Principal Place of Business:

Current Mailing Address:

7100 WESTWIND, SUITE 115
EL PASO, TX 79912

New Mailing Address:

FEI Number: 74-2819189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: HENKELS, JUDITH H
Address: 2040 NORTH HIGHWAY 360
City-St-Zip: GRAND PRAIRIE, TX 75050

Title: PD ( ) Delete
Name: APODACA, FRANK B
Address: 7100 WESTWIND, SUITE 115
City-St-Zip: EL PASO, TX 75050

Title: VD ( ) Delete
Name: WALKER, VERNOY MD
Address: 7100 WESTWIND, SUITE 115
City-St-Zip: EL PASO, TX 75050

Title: VS ( ) Delete
Name: RUIZ, ELISEO III
Address: 2040 NORTH HIGHWAY 360
City-St-Zip: GRAND PRAIRIE, TX 75050

Title: AS ( ) Delete
Name: ROBB, KAREN L
Address: 2040 NORTH HIGHWAY 360
City-St-Zip: GRAND PRAIRIE, TX 75050

Title: D ( ) Delete
Name: JONES, ROBERT E
Address: 7100 WESTWIND, SUITE 115
City-St-Zip: EL PASO, TX 79912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: KAREN L. ROBB AS 04/12/2005

Electronic Signature of Signing Officer or Director — Date