

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F96000005468

FILED
Apr 09, 2002 8:00 AM
Secretary of State

Entity Name: PMG ASSET MANAGEMENT, INC.

Current Principal Place of Business:

500 AUSTRALIAN AVE S
SUITE 850
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

% CUMBERLAND LICENSING
P.O. BOX 7543
CUMBERLAND, RI 02864 US

New Mailing Address:

FEI Number: 13-3909246 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCBAY, WALTER
500 AUSTRALIAN AVE S
STE 850
WPB, FL 33401

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: P/D () Delete
Name: SCHERRMAN, MICHAEL
Address: ONE KEMPER DRIVE
City-St-Zip: LONG GROVE, IL 60049

Title: V () Delete
Name: HOCK, ROBERT
Address: 515 MADISON AVENUE
City-St-Zip: NY, NY 10022

Title: V () Delete
Name: MCBAY, WALTER
Address: 500 AUSTRALIAN AVE S STE 850
City-St-Zip: WPB, FL 33401

Title: V () Delete
Name: COBNETTI, LAURA
Address: 515 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022

Title: V () Delete
Name: RITTMAN, BARRY
Address: 500 AUSTRALIAN AVE., S. STE. 850
City-St-Zip: WEST PALM BEACH, FL 33401

Title: S () Delete
Name: REFABAK, DEBRA
Address: ONE KEMPER DRIVE
City-St-Zip: LONG GROVE, IL 60049

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: V (X) Change () Addition
Name: COGNETTI, LAURA
Address: 515 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022

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

Title: S (X) Change () Addition
Name: REZABAK, DEBRA
Address: ONE KEMPER DRIVE
City-St-Zip: LONG GROVE, IL 60049

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: BARRY RITTMAN

VP

04/09/2002

Electronic Signature of Signing Officer or Director

_____ Date

DAVID D. JORGENSEN, TREASURER
ONE KEMPER DRIVE
LONG GROVE, IL 60049