

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2001 8:00 am
Secretary of State

05-05-2001 90428 001 ***300.00

DOCUMENT # F98000000367

1. Entity Name
AMWAY CORPORATION
Altacor Inc.

Principal Place of Business 7575 EAST FULTON ROAD ADA MI 49355	Mailing Address 7575 EAST FULTON ROAD ADA MI 49355
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41245



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

4. FEI Number 38-1736584	Applied For
	Not Applicable

Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	DEVOS, RICHARD M JR	
STREET ADDRESS	7575 EAST FULTON ROAD	
CITY-ST-ZIP	ADA MI 49355	
TITLE	VS	<input checked="" type="checkbox"/> Delete
NAME	MEURLIN, CRAIG N	
STREET ADDRESS	7575 EAST FULTON ROAD	
CITY-ST-ZIP	ADA MI 49355	
TITLE	AS	<input type="checkbox"/> Delete
NAME	MITCHELL, KIM	
STREET ADDRESS	7575 EAST FULTON ROAD	
CITY-ST-ZIP	ADA MI 49355	
TITLE	C	<input type="checkbox"/> Delete
NAME	VAN ANDEL, JAY	
STREET ADDRESS	7575 EAST FULTON ROAD	
CITY-ST-ZIP	ADA MI 49355	
TITLE	VCFO	<input checked="" type="checkbox"/> Delete
NAME	CALL, LAWRENCE M	
STREET ADDRESS	7575 EAST FULTON ROAD	
CITY-ST-ZIP	ADA MI 49355	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael A. Mohr	
STREET ADDRESS	7575 E Fulton Rd	
CITY-ST-ZIP	Ada, MI 49355-0001	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VCFO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lynn J. Lyall	
STREET ADDRESS	7575 East Fulton Rd	
CITY-ST-ZIP	Ada, MI 49355-0001	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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.

SIGNATURE: *Craig V. Witcher* **Craig V. Witcher, V.P. & Ass't Treas.** (616) 4-17-01 787-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)