FILED

Daytime Phone #

Date

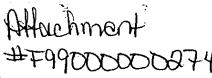
2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other, like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Feb 25, 2002 8:00 am Secretary of State F99000000274 DOCUMENT # 1. Entity Name PRIMEDIA SPECIAL INTEREST PUBLICATIONS INC. 02-25-2002 90043 001 ***150.00 Mailing Address Principal Place of Business 745 FIFTH AVENUE 745 FIFTH AVENUE NEW YORK NY 10151 NEW YORK NY 10151 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State . City & State 52-1654079 Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 E. PARK AVENUE TALLAHASSEE FL 32301 Zip Code City FL 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 Signature, typed or printed name of registered agent and title if application (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (9/01) ☐ Addition [] Change ☐ Delete TITI F TITLE ROGERS, THOMAS S NAME NAME STREET ADDRESS STREET ADDRESS **48 BILTMORE AVENUE** CITY-ST-ZIP **RYE NY 10580** CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE DS TITLE NAME NAME CHELL, BEVERLY C STREET ADDRESS STREET ADDRESS 21-BLUEWATER HILL CITY-ST-ZIP CITY-ST-ZIP WESTPORT CT 06880 ☐ Addition Change TITLE ☐ Delete TITLE MCCURDY, CHARLES G NAME STREET ADDRESS STREET ADDRESS 1158 FIFTH AVENUE CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10029** Change Addition TITLE ☐ Delete TITLE NAME NAME COLODNY, MARK STREET ADDRESS STREET ADDRESS 59 EAST 92ND STREET CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10128** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME DISCEPLO, MICHAEL C STREET ADDRESS STREET ADDRESS **46 WOLF HILL ROAD** CITY-ST-ZIP CITY-ST-ZIP **MELVILLE NY 11747** ☐ Change ☐ Addition TITLE TITLE ☐ Delete MAGGIO, DOMENIC NAME NAME STREET ADDRESS STREET ADDRESS 4 MARTINE AVENUE CITY-ST-ZIP CITY-ST-ZIP WHITE PLAINS NY 10606 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



325450

PRIMEDIA Magazine & Internet Group

6405 Flank Drive, Harrisburg, PA 17112
Telephone 717 657-9555
Facsimile
Accounts Payable 717 671-4328
Accounts Receivable 717 671-4348
Advertising 717 540-6706
Classified Advertising 717 671-4346
Graphic Design 717 671-4322
Human Resources 717 657-1139

IT 717 657-9526

Market Research 717 540-4767

Prepress 717 657-9552 Production 717 540-4767

Products 717 540-6727

January 18, 2002

Secretary of State- Florida Division of Corporations PO Box 6327 Tallahassee FL 32314

Dear Sir or Madam:

Enclosed you will find the completed and executed 2002 Uniform Business Report and our check in the amount of \$150.00 to cover the Annual Fee for Primedia Special Interest Publications, Inc. in the state of Florida for the year 2002.

If there are any problems with this submission or you have any questions or need additional information, please contact me by phone at 717-540-6600, fax 717-671-4307 or email "www.pats@cowles.com".

Sincerely,

Patricia A. Shaver

Contract Administrator