


FILED
May 15, 2003 8:00 am
Secretary of State

05-15-2003 90110 048 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F99000000349

1. Entity Name
INTERPARK INCORPORATED



Principal Place of Business
 111 W. JACKSON BLVD., SUITE 1900
 CHICAGO, IL 60604

Mailing Address
 111 W. JACKSON BLVD., SUITE 1900
 CHICAGO, IL 60604

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 City & State

Zip
 Country

Zip
 Country



CHECK HERE IF MAKING CHANGES

4. FEI Number
36-4111108

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CSC
1201 HAYS STREET
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

B. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when substituting) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
 After May 1, 2003 Fee will be \$550.00
 Make Check Payable to: Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D	MOORE, CONSTANCE B 126 LINCOLN AVE SANTA FE, NM 87501	TITLE Director + CEO	J. Marshall Peck 111 West Jackson Blvd, Suite 1900 Chicago, IL 60604
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE D	WATTLES, THOMAS G 126 LINCOLN AVE SANTA FE, NM 87501	TITLE Secretary	Sarah Braden 111 West Jackson Blvd, Suite 1900 Chicago, IL 60604
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE SVPC	DUNCAN, ROBERT S 111 W JACKSON RD STE 1900 CHICAGO, IL 60604	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE COO	PORIER, DOUGLAS I 111 W JACKSON RD STE 1900 CHICAGO, IL 60604	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE CIO	PRUSSIAN, MICHAEL P 111 W JACKSON BLVD SUITE 1900 CHICAGO, IL 60604	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE AT	SHAFFER, D. BRENT 7777 MARKET CENTER AVE EL PASO, TX 89912	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sarah Braden Secretary **Sarah Braden** Secretary
 Date: **May 13, 2003** Daytime Phone #: **312-935-2921**

CR2E034 (10/02)