



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91031 049 ***150.00

DOCUMENT # F99000000798 1. Entity Name APPLIED DECISIONS USA, INC.					
Principal Place of Business 2821 S. FAIRFIELD AVE. SUITE B LOMBARD, IL 60148			Mailing Address 2821 S. FAIRFIELD AVE. SUITE B LOMBARD, IL 60148		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 225 W. Wacker Dr., Suite 2800 Suite, Apt. #, etc. Attn: James A. Christman			
City & State		City & State Chicago, IL		4. FEI Number 04152004 Chg-P CR2E034 (10/03) 36-4054365	
Zip 60606		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEXISNEXIS DOCUMENT SOLUTIONS INC. 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 _____	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GINN, R. ERIC 2821 S FAIRFIELD AVE, STE B LOMBARD, IL 60148	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD DIRMEIKIS, MICHAEL 2821 S FAIRFIELD AVE, STE B LOMBARD, IL 60148	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GOLDSTEIN, MICHAEL 2821 S FAIRFIELD AVE, STE B LOMBARD, IL 60148	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCWETHY, JAMES B 2821 S FAIRFIELD AVE, STE B LOMBARD, IL 60148	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VAUGHN, GREG 3201 AIRPORT FREEWAY BEDFORD, TX 76021	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CARROLL, RODNEY 2821 S. FAIRFIELD AVENUE SUITE B LOMBARD, IL 60148	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Rodney Carroll 2821 S. Fairfield Ave., Suite B Lombard, IL 60148	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
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: <u>Rodney Carroll</u> 4/26/04 630-663-8800 X10x <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					