

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001823

FILED
Jun 26, 2008
Secretary of State

Entity Name: ACCESS INTEGRATED NETWORKS, INC.

Current Principal Place of Business:

4885 RIVERSIDE DRIVE
SUITE 202, RIVERSIDE CORPORATE CENTER
MACON, GA 31210

New Principal Place of Business:

4885 RIVERSIDE DRIVE
SUITE 304, RIVERSIDE CORPORATE CENTER
MACON, GA 31210

Current Mailing Address:

4885 RIVERSIDE DRIVE
SUITE 202, RIVERSIDE CORPORATE CENTER
MACON, GA 31210

New Mailing Address:

4885 RIVERSIDE DRIVE
SUITE 304, RIVERSIDE CORPORATE CENTER
MACON, GA 31210

FEI Number: 58-2233012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANTON, EDWIN F
825 THOMASVILLE ROAD
TALLAHASSEE, FL 32303 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CFO () Delete
Name: OVELL, APRYLE
Address: 4885 RIVERSIDE DR., SUITE 304
City-St-Zip: MACON, GA 31210

Title: PD () Delete
Name: ODDO, VINCENT
Address: 4885 RIVERSIDE DR., SUITE 304
City-St-Zip: MACON, GA 31210

Title: S () Delete
Name: BAXTER, D. MARK
Address: 577 MULBERRY ST., SUITE 800
City-St-Zip: MACON, GA 31210

Title: D () Delete
Name: GREEN, HOLCOMBE
Address: 3060 PEACHTREE ST. NW., SUITE 1060
City-St-Zip: ATLANTA, GA 30305

Title: D () Delete
Name: GODSEY, KIRBY R DR
Address: 3060 PEACHTREE ST, NW., SUITE 1060
City-St-Zip: ATLANTA, GA 30305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: BUNCE, CHRIS
Address: 2300 MAIN STREET, SUITE 600
City-St-Zip: KANSAS CITY, MO 64108

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: VINCENT M. ODDO

PD

06/26/2008

Electronic Signature of Signing Officer or Director

Date