## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N01000008095

Entity Name: ACCESS IN MOTION, INC.

FILED Apr 30, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2726 ROBERT OLIVER AVE 2726 ROBERT OLIVER AVE FERNANDINA BEACH, FL FERNANDINA BEACH, FL 32034 **Current Mailing Address: New Mailing Address:** P.O. BOX 16762 FERNANDINA BEACH, FL 32035 FEI Number: 59-3759598 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POOLE, WESLEY P 303 CENTRE STREET STE 200 US FERNANDINA BEACH, FL 32034 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete BARTON, DEEANN BARTON, DEEANN Name: Name: 2726 ROBERT OLIVER AVE Address: 2726 ROBERT OLIVER AVE Address: City-St-Zip: FERNANDINA BEACH, FL City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: (X) Change ( ) Addition BARTON, ANDREW M Name: HARDEE, KATHLEEN Name: Address: 2726 ROBERT OLIVER AVE Address: 1612 DADE STREET City-St-Zip: FERNANDINA BEACH, FL City-St-Zip: FERNANDINA BEACH, FL 32034 Title: Title: (X) Change ( ) Addition () Delete LAID, SUSAN LAIRD, SUSAN Name: Name: Address: 501 SO 6TH STREET Address: 501 SOUTH 6TH STREET City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: ( ) Change (X) Addition Name: Name: DEONAS, KRISTY Address: Address: 907 STANLEY DRIVE City-St-Zip: City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: ( ) Change (X) Addition EMANUEL, MICHAEL Name: Name: 110 NORTH 14TH STREET Address: Address: City-St-Zip: City-St-Zip: FERNANDINA BEACH, FL 32034

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEEANN BARTON D 04/30/2002