FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary of State 1997 DOCUMENT # P22926 (0)ACCESS GRAPHICS, INC. Principal Place of Business Mailing Address 1426 PEARL STREET, #400 1426 PEARL STREET. #400 BOULDER CO 80302-5340 BOULDER CO 80302-5340 3. Date Incorporated or Qualified 3a. Date of Last Report 02/09/1989 02/27/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 84-1099890 21 26 Not Applicable Suite Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zin Country Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DELETE Addition TITLE PD 1.1 TITLE RAMSEY, JOHN B. 1.2 NAME NAME 1426 PEARL ST. #400 STREET ADDRESS 1.3 STREET ADDRESS **BOULDER CO** 1.4 CITY-ST-ZIP CITY - ST - 7(P DELETE Change ■ Addition 2.1 TITLE TITLE TEETS, PETER B 2.2 NAME NAME **6801 ROCKLEDGE DRIVE** STREET ADDRESS 2.3 STREET ADDRESS BETHESDA MA 2 4 CITY-ST-ZIP CITY - ST - ZIF DELETE Change Addition TILLE 31 TITLE HOOVER, ROGER K 32 NAME NAME 6801 ROCKLEDGE DRIVE 3.3 STREET ADDRESS STREET ADDRESS **BETHESDA MA** 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Addition 41 TITLE Change TITLE CARSON, THOMAS E 4. 2 NAME NAME 1426 PEARL STREET. #400 4.3 STREET ADDRESS STREET ADDRESS **BOULDER CO** 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE MCGREGOR, JANET L 5.2 NAME NAME 6801 ROCKLEDGE DRIVE STREET ADDRESS 5.3 STREET ADDRESS BETHESDA MA 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE REYNOLDS, PETER C NAM: 6.2 NAME 6801 ROCKLEDGE DRIVE STREET ADDRESS 6.3 STREET ADDRESS **BETHESDA MD** CITY - ST - ZIP 6.4 CITY - ST - ZIP

14. I do hereby certify that the internation 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 annual/hipport or supplemental annual 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 12 or Block 13 if citanged on an attachment with an address.

SIGNATURE:

NTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Date

FILED

Feb 19 1997 8:00am