FOR PROFIT CORPORATION PORT (UBR)

FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 91526 033 ***150.00

OMILONN	BUSINESS REPU
CUMENT #	P34647



Proquest information and Learning Company					4 0000514	
DO NOT WRITE IN THIS SPACE				10090514		
2. Principal Place of Business 3. Mailing 'Address 300 N. Zeeb Road 300 N. Zeeb Road		d				
Suite, Apt. #, etc.		Suite, Apt. #. etc.			DO NOT WRITE IN THIS SPACE	
City & State Ann Arbor, MI		City & State Ann Arbor, MI			4. FEI Number 36-3580102 Applied For Not Applicable	
Zip 48103	Country United States	Zip 48103	Country United Sta	tes	5. Certificate of Status Desired S8.75 Additional Fee Required	
DO NOT WRITE		Name Street		7. Name and Address of Current Registered Agent Corporation System ess (P.O. Box Number is Not Acceptable)		
		1200	1200 S. Pine Island Road			
8. The above named	· · · · · · · · · · · · · · · · · · ·			City Plantation, FL Zip Code 33324		
the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tille it applicable. (NOTE: Registered Agent signature required when reinstating) January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State						
10.	OFFICERS AND	,	774.5	- 		
TITLE NAME President/Director Alan Aldworth 300 N. Zeeb Road, Ann Arbor, MI 48103		TITLE NAME STREET ADDRESS CITY-ST-ZIP				
STREET ADDRESS Tod	e President, Secretary/ d Buchardt N. Zeeb Road, Ann Ar		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP Vice President/Director Kevin Gregory 300 N. Zeeb Road, Ann Arbor, MI 48103		TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE		
STREET ADDRESS Patr	Treasurer Patrick Randall		TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
STREET ADDRESS John	Assistant Treasurer John Carr 300 N. Zoah Board App Arbor MI 49403		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
STREET ADDRESS Jam	VICE President/Asst. Secretary James Barcelona		TITLE NAME STREET ADDRESS 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 eath, 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 on an attachment with an address, with all other like empowered.						
SIGNATURE: Todd W. Buchardt			4/22/03 734/997-4915 Dale Daylire Phone #			