2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000031565

Entity Name: TAK-A-SAMPLE MARKETING, INC.

FILED May 02, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: P O BOX 422 NEW ALBANY, OH 43054 LIS **Current Mailing Address: New Mailing Address:** P.O. BOX 422 NEW ALBANY, OH 43054 US FEI Number: 31-1593643 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition KISIEL, ROGER W Name: Name: 5093 HEATH GATE DRIVE Address: Address: City-St-Zip: NEW ALBANY, OH 43054 City-St-Zip: Title: Title: () Delete () Change () Addition Name: KISIEL, SHARON D Name: 5093 HEATH GATE DRIVE Address: Address: NEW ALBANY, OH 43054 City-St-Zip: City-St-Zip: () Delete Title: Title: VPD () Change () Addition SANFORD, STANLEY J Name: Name: 370 GLENSIDE LANE Address: Address: City-St-Zip: POWELL, OH 43065 City-St-Zip: Title: () Delete Title: () Change () Addition WAMBOLD, JOHN Name: Name: Address: 1126 HORSHAM RD Address: City-St-Zip: AMBLER, PA 19002 City-St-Zip: Title: () Delete Title: () Change () Addition STEINBACHER, DON Name: Name: 101 INDIAN SPRINGS Address: Address: City-St-Zip: KENNETT SQUARE, PA 193483 City-St-Zip: Title: () Delete Title: () Change () Addition ROCKEY, ROBERT Name: Name: 1020 BARROW INDUSTRIAL PKWY Address: Address: City-St-Zip: City-St-Zip: WINDER, GA 30680

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON D KISIEL STD 05/02/2002