

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**


1082

**FILED**

04 APR 23 PM 5: 02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # F96000006654**  
1. Entity Name  
**ASSOCIATED BUSINESS PRODUCTS, INC.**



Principal Place of Business      Mailing Address  
2329 CIRCADIAN WAY      PO BOX 7789  
SANTA ROSA, CA 95407 US      SANTA ROSA, CA 95407 US

2. Principal Place of Business      3. Mailing Address  
Suite, Apt. #, etc.      Suite, Apt. #, etc.  
City & State      City & State  
Zip      Country      Zip      Country

04202004      Chg-P      CR2E034 (10/03) *04*

4. FEI Number      Applied For  
**68-0003209**      Not Applicable

5. Certificate of Status Desired       \$8.75 Additional Fee Required



6. Name and Address of Current Registered Agent  
**OCHSENHIRT, GARY**  
110 COASTLINE RD  
SANFORD, FL 32771

7. Name and Address of New Registered Agent  
Name      **CT Corporation System**  
Street Address (P.O. Box Number is Not Acceptable)  
**1200 S. Pine Island Road**  
City      **Plantation**      FL      Zip Code      **33324**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Connie Bryan*      **CONNIE BRYAN**      **SPECIAL ASSISTANT SECRETARY**      DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees

**FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO MCCLEAN, GRAHAM J 45 DUKESLANE LINCOLNSHIRE, IL 60069 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>SEE ATTACHED</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STUDKJAER, ANDERS 4531 TALL OAKS LANE ROLLING MEADOWS, IL 60008 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>300035724083</b> <b>05/06/04--01071--024 **150.00</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kevin Barnes*      **KEVIN BARNES**      4/21/04      501-224-1992

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

6

Attachment to 2004 Annual Report  
Associated Business Products, Inc.

11. Additions/Changes to Officers and Directors

Change – CEO

Graham J. McClean  
c/o Global Docugraphix, Inc.  
300 Village Green, Suite 225  
Lincolnshire, IL 80111-60069

Addition – Director

Alan Bratton  
c/o Global Docugraphix, Inc.  
300 Village Green, Suite 225  
Lincolnshire, IL 80111-60069

Addition - Chairman of the Board

Carl D. Thoma  
c/o Global Docugraphix, Inc.  
300 Village Green, Suite 225  
Lincolnshire, IL 80111-60069

Addition – Director

Frank Krasovec  
c/o Global Docugraphix, Inc.  
300 Village Green, Suite 225  
Lincolnshire, IL 80111-60069

Addition - Vice President (Operations)

Mike Cate  
c/o Global Docugraphix, Inc.  
300 Village Green, Suite 225  
Lincolnshire, IL 80111-60069

Addition - Secretary, Treasurer

Kevin Barnes  
c/o Global Docugraphix, Inc.  
300 Village Green, Suite 225  
Lincolnshire, IL 80111-60069

Addition - Director

Peter Ehrich  
c/o Global Docugraphix, Inc.  
300 Village Green, Suite 225  
Lincolnshire, IL 80111-60069

Addition - Director

D. Christian Osborn  
c/o Global Docugraphix, Inc.  
300 Village Green, Suite 225  
Lincolnshire, IL 80111-60069