

8022
**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 30, 2003 8:00 am
Secretary of State

0047649 AT

DOCUMENT # P00646

1. Entity Name
CAMBIUM CORPORATION



04-30-2003 90118 020 ***150.00

11028881



Principal Place of Business
**730 TERMINAL TOWER
 50 PUBLIC SQ
 CLEVELAND OH 44113
 US**

Mailing Address
**730 TERMINAL TOWER
 50 PUBLIC SQ
 CLEVELAND OH 44113
 US**

2. Principal Place of Business
1160 Terminal Tower

3. Mailing Address
1160 Terminal Tower

Suite, Apt. #, etc.
50 Public Square

City & State
Cleveland, Ohio

City & State
Cleveland, Ohio

Zip Country
44113 US

Zip Country
44113 US

4. FEI Number **34-1413332** Applied For
 Not Applicable

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

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RATNER, RONALD A 1100 TERMINAL TOWER, 50 PUBLIC SQ CLEVELAND OH 44113 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT PROHASKA, JAMES 1100 TERMINAL TOWER, 50 PUBLIC SQ CLEVELAND OH 44113 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS PELAVIN, EDWARD 1100 TERMINAL TOWER, 50 PUBLIC SQ CLEVELAND OH 44113 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRADY, JAMES T 1100 TERMINAL TOWER, 50 PUBLIC SQ CLEVELAND OH 44113 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAGEE, JAY W 1100 TERMINAL TOWER, 50 PUBLIC SQ. CLEVELAND OH 44113 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Ronald A. Ratner 1160 Terminal Tower 50 Public Square Cleveland, Ohio 44113 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTAS James J. Prohaska 1160 Terminal Tower 50 Public Square Cleveland, Ohio 44113 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS Edward Pelavin 1160 Terminal Tower 50 Public Square Cleveland, Ohio 44113 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V James T. Brady 1160 Terminal Tower 50 Public Square Cleveland, Ohio 44113 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Jay W. Magee 1160 Terminal Tower 50 Public Square Cleveland, Ohio 44113 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V John D. Brocklehurst 1160 Terminal Tower 50 Public Square Cleveland, Ohio 44113 <input type="checkbox"/> Change <input checked="" 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)(f), 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: James J. Prohaska **4/18/03**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)