

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90318 018 ***150.00

DOCUMENT # P38917
 1. Entity Name
AUTOMATED WAGERING INTERNATIONAL, INC.

Principal Place of Business
2311 S 7TH AVE
BOZEMAN MT 59715
US

Mailing Address
815 PILOT ROAD
STE G
LAS VEGAS NV 89119
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1255 Broad Street
 Suite, Apt. #, etc.
Suite 200
 City & State
Clifton, NJ

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip
07013
 Country
USA

4. FEI Number
13-3666192
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDEV MATTHEWS, THOMAS J 815 PILOT RD STE G LAS VEGAS NV 89119	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAGE, GEOFFREY A 815 PILOT RD STE G LAS VEGAS NV 89119	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director, President and CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1085 Palms Airport Drive Las Vegas, NV 89119	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President, Sec'y & Dir.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Christer S. T. Roman 815 Pilot Road, Suite G Las Vegas, NV 89119	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer and Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sara Beth Brown 9295 Prototype Drive Reno, NV 89511	
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"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **SIGNATURE REQUIRED** **CEO and President** (702) 896-8886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

ATTACH DOC# P38917/635083



International Game Technology

April 12, 2002

VIA FEDERAL EXPRESS

Division of Corporations
Uniform Business Report Filings
409 East Gaines Street
Tallahassee, FL 32399

Re: Automated Wagering International, Inc.

Dear Sir/Madam:

Enclosed please find our 2002 Uniform Business Report along with our check number 00249891 in the amount of \$150.00 representing the annual fee.

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Valerio", is written over the word "Sincerely,". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Valerie Salerno