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Apr 14 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 763717 (6)

1. Corporation Name
AMERICAN READING FORUM, INC.

Principal Place of Business	Mailing Address
C/O BRISTOR, VALERIE J 2334 CYPRESS BEND DR. S., APT 912 POMPANO BEACH FL 33069 US	C/O BRISTOR, VALERIE J 2334 CYPRESS BEND DR., S., APT 912 POMPANO BEACH FL 33069 US

3. Date Incorporated or Qualified: 06/16/1982

4. FEI Number: 58-1548325 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

BRISTOR, VALERRIA J
2334 CYPRESS BEND DRIVE SOUTH, APT 912
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name: Bristor, Valerie J.
82 Street Address (P.O. Box Number is Not Acceptable):
83
84 City: FL 85 Zip Code:

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	T	☐ DELETE	1.1 TITLE	T	☒ Change ☐ Addition
NAME	DOWHOWE, SARAH		1.2 NAME	Dowhower, Sarah	
STREET ADDRESS	5963 FAIRHAM RD		1.3 STREET ADDRESS	5963 Fairham Road	
CITY-ST-ZIP	HAMILTON OH		1.4 CITY-ST-ZIP	Hamilton, OH 45011	
TITLE	V	☐ DELETE	2.1 TITLE	P/D	☒ Change ☐ Addition
NAME	BRISTON, VALERIE		2.2 NAME	Bristor, Valerie	
STREET ADDRESS	2334 CYPRESS BEND DR S #912		2.3 STREET ADDRESS	2334 Cypress Bend Dr. S. #912	
CITY-ST-ZIP	POMPANO BCH FL		2.4 CITY-ST-ZIP	Pompano Bch, FL 33069	
TITLE	PD	☒ DELETE	3.1 TITLE	V/D	☐ Change ☒ Addition
NAME	STAHL, NORMAN A		3.2 NAME	Bass, Jo Ann	
STREET ADDRESS	536 KENDALL LN		3.3 STREET ADDRESS	PO Box 2845	
CITY-ST-ZIP	DEKALB IL		3.4 CITY-ST-ZIP	Valdosta, GA 31604 N/A	
TITLE	SD	☒ DELETE	4.1 TITLE	S/D	☐ Change ☒ Addition
NAME	RANDLETT, ALICE		4.2 NAME	Mallery, Anne N/A	
STREET ADDRESS	1217 LINDBERGH AVE		4.3 STREET ADDRESS	millersville University, PO Box 1002	
CITY-ST-ZIP	STEVEN POINT WI		4.4 CITY-ST-ZIP	Strayer 2000 millersville, PA 17551	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (10/97)

14. 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Valerie J. Bristor Valerie J. Bristor 3/9/98 (561)297-3584
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #