

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90018 015 ***150.00

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1. Entity Name
BOOKS ARE FUN, LTD., INCORPORATED

Principal Place of Business

**1680 HIGHWAY 1 NORTH
FAIRFIELD IA 52556**

Mailing Address

**1680 HIGHWAY 1 NORTH
FAIRFIELD IA 52556**

2. Principal Place of Business

SAME AS ABOVE

Suite, Apt. #, etc.

3. Mailing Address

PO BOX 2468

Suite, Apt. #, etc.

City & State

City & State

City & State

FAIRFIELD IA

Zip

Country

JEFFERSON

Zip

52556

Country

JEFFERSON

4. FEI Number

42-1360501

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HQ CORPORATE SERVICES, INC.
526 E. PARK AVE, SUITE 200
TALLAHASSEE FL 32301**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KAPLAN, EARL P 1680 HIGHWAY 1, NORTH FAIRFIELD IA 52556	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO MCLAUGHLIN, TED 1680 HIGHWAY 1 NORTH FAIRFIELD IA 52556	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CAS CAMP, LARRY A 1680 HIGHWAY 1 NORTH FAIRFIELD IA 52556	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT MONAHAN, BONNIE M READERS DIGEST ROAD PLEASANTVILLE NY 10570	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAGILL, WILLIAM H 85 SOUNDERS LANE RIDGEFIELD CT 06877	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUPREE, CLIFFORD H.R. 136 EAST 64TH STREET NEW YORK NY 10021	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOEL FEIGENBAUM 1680 HIGHWAY 1, NORTH FAIRFIELD IA 52556	☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT BARRY M. LIESMAN READERS DIGEST ROAD PLEASANTVILLE, NY 10570	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MICHAEL A. BRIZEL READERS DIGEST ROAD PLEASANTVILLE, NY 10570	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D	☒ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/01

Date

Daytime Phone #

CR2E034 (10/00)