

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 20 AM 11:08

DOCUMENT # 763717

(6)

1. Corporation Name

AMERICAN READING FORUM, INC.

Principal Place of Business

Mailing Address

C/O RICHARD A. THOMPSON
8604 BAYLOR CIR
ORLANDO FL 32817

C/O RICHARD A. THOMPSON
8604 BAYLOR CIR
ORLANDO FL 32817

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/16/1982 3a. Date of Last Report 05/01/1994
4. FEI Number 58-1548325 Applied For Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 40 Valerie J. Bristor
Suite, Apt. #, etc. apt. 912

26 Valerie J. Bristor
Suite, Apt. #, etc. apt 912

22 2334 Cypress Bend Dr. South

27 2334 Cypress Bend Dr. South

City & State

City & State

23 Pompano Beach, FL

28 Pompano Beach, FL

Zip

Country

Zip

Country

24 33069

25 USA

29 33069

30 USA

9. Name and Address of Current Registered Agent

THOMPSON, RICHARD A.
8604 BAYLOR CIR
ORLANDO FL 32817

10. Name and Address of New Registered Agent

81 Name Valerie J. Bristor
82 Street Address (P.O. Box Number is Not Acceptable) 2334 Cypress Bend Drive South, Apt. 912
83
84 City Pompano Beach, FL 85 Zip Code 33069

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Richard A. Thompson

Valerie J. Bristor

1-12-95

(Signature, typed or printed name of registered agent and fee if applicable.)

(NOTE: Registered Agent Signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	T
NAME	TELFER, RICHARD
STREET ADDRESS	304 WOODLAND DRIVE
CITY-ST-ZIP	WHITEWATER WI
TITLE	PD
NAME	MOORMAN, GARY
STREET ADDRESS	APPALACHIAN STATE UNIVERSITY
CITY-ST-ZIP	BOONE NC
TITLE	VD
NAME	GILLESPIE, CINDY
STREET ADDRESS	318 TEACHERS COLLEGE BALL STATE UNIVERSITY
CITY-ST-ZIP	MUNCIE IN
TITLE	SD
NAME	DOWHOWER, SARAH
STREET ADDRESS	301 MCGUFFEY HA;
CITY-ST-ZIP	OXFORD OH
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	T	☒ Change ☐ Addition
1.2 NAME	Gustafson, David	
1.3 STREET ADDRESS	106 Morris Hall, U-W-LaCrosse	
1.4 CITY-ST-ZIP	LaCrosse, WI 54601	
2.1 TITLE	PD	☒ Change ☐ Addition
2.2 NAME	GILLESPIE, CINDY	
2.3 STREET ADDRESS	529 Education Building Bowling Green S. U.	
2.4 CITY-ST-ZIP	Bowling Green, OH 43403	
3.1 TITLE	VD	☒ Change ☐ Addition
3.2 NAME	Laine, Chester	
3.3 STREET ADDRESS	P.O. Box 210002 University of Cincinnati	
3.4 CITY-ST-ZIP	Cincinnati, OH 45221-0002	
4.1 TITLE	SD	☒ Change ☐ Addition
4.2 NAME	Randlett, Alice	
4.3 STREET ADDRESS	1217 Lindbergh Ave.	
4.4 CITY-ST-ZIP	Stevens Point, WI 54481	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Richard Telfer

Richard Telfer (Treasurer)

2/11/95

414 472-1006

(Signature and typed or printed name of signing officer or director)

(Date) (Telephone Number)