

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 571688 (1)  
1. Corporation Name  
LEARNING CORP.



Principal Place of Business Mailing Address  
2204 BAY DR  
POMPANO BEACH FL 33062  
US

3. Date Incorporated or Qualified 05/10/1978  
3a. Date of Last Report 04/25/1995

2. Principal Place of Business  
21 RR # 3, BOX E-1  
Suite, Apt. #, etc.

2a. Mailing Address  
26 RR # 3, BOX E-1  
Suite, Apt. #, etc.

4. FEI Number 59-1836050  
Applied For  
Not Applicable

23 City & State  
PROVO, UT

28 City & State  
PROVO, UT

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

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

24 Zip  
84604

25 Country  
USA

29 Zip  
84604

30 Country  
USA

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAPELOW, STEPHEN  
2204 BAY DRIVE  
POMPANO BCH. FL 33062

81 Name KAPELOW, STEPHEN  
82 Street Address (P.O. Box Number is Not Acceptable)  
2861 N.E. FIFTEENTH ST.  
83  
84 City POMPANO BEACH FL 85 Zip Code 33060

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

Signature typed or printed name of registered agent and block applicable

(NOTE: Registered Agent signature required when registering)

STEPHEN KAPELOW  
3/26/96  
DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME KAPELOW, STEPHEN  
STREET ADDRESS 2204 BAY DRIVE  
CITY-ST-ZIP POMPANO BCH. FL ☐ DELETE

TITLE VSD  
NAME KAPELOW, LOREN  
STREET ADDRESS 2204 BAY DRIVE  
CITY-ST-ZIP POMPANO BCH. FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PDS  
1.2 NAME KAPELOW, LOREN  
1.3 STREET ADDRESS RR # 3, BOX E-1  
1.4 CITY-ST-ZIP PROVO, UT 84604 ☒ Change ☐ Addition

2.1 TITLE VP  
2.2 NAME KAPELOW, STEPHEN  
2.3 STREET ADDRESS RR # 3, BOX E-1  
2.4 CITY-ST-ZIP PROVO, UT 84604 ☒ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 119.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEPHEN KAPELOW 3/26/96

Date

Daytime Phone

CR2E034 (12/95)

JR 4/9/96