

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

FILED

95 MAY -1 AM 4:23

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
JENNIFER B. MONTGOMERY
GOVERNOR
JAMES B. GRIFFIN
COMMISSIONER

SECRETARY OF STATE
DAVID WASSER FLORIDA

DOCUMENT # 811117 (1)

THE KIPLINGER WASHINGTON EDITORS, INC.

1. Principal Office of Corporation % TREASURER'S OFFICE 1729 H STREET NW WASHINGTON DC 20006		2a. Mailing Address % TREASURER'S OFFICE 1729 H STREET NW WASHINGTON DC 20006		3. Date of Incorporation in Jurisdiction 12/19/1952 4. Filing Number 53-0094610 5. Certificate of Status Demand ☐ \$8.75 Additional Fee Required 6. Excess Franchise Tax and Treas. Fund Contribution ☐ \$5.00 May Be Added to Fees 7. This corporation has liability for intangible tax under Fla. Stat. § 218.01 ☐ Yes ☒ No	
2. Principal Office of Corporation 21. State of Incorporation 22. City or County 23. Zip Code		2b. Mailing Address 26. State of Incorporation 27. City or County 28. Zip Code		8a. Date of Last Report 05/01/1994 8b. Report Due Date 9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	
24. State of Incorporation 25. City or County 26. Zip Code		29. State of Incorporation 30. City or County 31. Zip Code		10. Name and Address of New Registered Agent 81. Name 82. Street Address, P.O. Box Number or Post Office 83. City 84. State FL 85. Zip Code	
11. I, the undersigned, being a duly authorized officer or director of the corporation, hereby certify that the above named corporation has made this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. This change was authorized by the corporation's board of directors, thereby accept the appointment of registered agent. I am familiar with and accept the obligations of the law of the State of Florida relating to this change.					
SIGNATURE 12. OFFICER, DIRECTOR, OR REGISTERED AGENT 13. ADDITIONAL OFFICERS, DIRECTORS, OR REGISTERED AGENTS					
12. OFFICER, DIRECTOR, OR REGISTERED AGENT NAME CD KIPLINGER, AUSTIN H. 16801 RIVER ROAD POOLESVILLE MD		13. ADDITIONAL OFFICERS, DIRECTORS, OR REGISTERED AGENTS 1. NAME ☐ Change ☐ Addition 2. NAME ☐ Change ☐ Addition 3. NAME ☐ Change ☐ Addition 4. NAME ☐ Change ☐ Addition 5. NAME ☐ Change ☐ Addition 6. NAME ☐ Change ☐ Addition 7. NAME ☐ Change ☐ Addition 8. NAME ☐ Change ☐ Addition 9. NAME ☐ Change ☐ Addition 10. NAME ☐ Change ☐ Addition 11. NAME ☐ Change ☐ Addition 12. NAME ☐ Change ☐ Addition 13. NAME ☐ Change ☐ Addition 14. NAME ☐ Change ☐ Addition 15. NAME ☐ Change ☐ Addition 16. NAME ☐ Change ☐ Addition 17. NAME ☐ Change ☐ Addition 18. NAME ☐ Change ☐ Addition 19. NAME ☐ Change ☐ Addition 20. NAME ☐ Change ☐ Addition			
NAME PD KIPLINGER, KNIGHT A. 5024 SEDGWICK ST NW WASHINGTON DC					
NAME VD KIPLINGER, TODD L. 5024 SEDGWICK ST NW WASHINGTON, D.C. 0					
NAME VTD WILKES, CORBIN M. 3200 N. WOODROW ST. ARLINGTON VA					
NAME SD MAYO, JAMES O 6204 VERNON PALMER CT MCLEAN, VA 00000					
NAME VD BRODERICK, STEPHEN J 508 WATTS BRANCH PARKWAY POTOMAC MD					
14. I, the undersigned, certify that the information required by this filing is voluntarily furnished and does not qualify for the exemption stated in law 95-131 (1)(b). I hereby certify that the information submitted by the corporation is a true and correct statement of the facts and that my signature shall have the same legal effect as if each spoke with that signature were on a single line of the corporation's return. This report is required by Chapter 445, Florida Statutes, and that my signature appears in Block 12 or Block 13 of this report of incorporation filed with the address.					
SIGNATURE: <i>Corbin Wilkes</i> V.P. FOR FINANCE 4/27/95 SIGNATURE AND TYPE OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR					

810117

Attachment to Florida Annual Report
1995

Officers and Directors

V/D

Miller, Theodore J.
5816 Colfax Avenue
Alexandria, VA