FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

Suite, Apt. #, etc

City & State

22

23

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Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 811117

(1)

Suite, Apt. #, etc.

City & State

THE KIPLINGER WASHINGTON EDITORS, INC.

Country

9. Name and Address of Current Registered Agent

25

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD

PLANTATION FL 33324

Principal Place of Business

TREASURER'S OFFICE
1729 H STREET NW
WASHINGTON DC 20006

2. Principal Place of Business

TREASURER'S OFFICE
1729 H STREET NW
WASHINGTON DC 20006

2. Principal Place of Business
2. Mailing Address
2. Principal Place of Business
2. Mailing Address
2. Principal Place of Business
3. Mailing Address
4. Mailing Address

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FILED May 14 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/19/1952 4. FEI Number Applied For 53-0094610 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible ☐ No Personal Property Tax due June 30, ☐ Yes 10. Name and Address of New Registered Agent

Zip Code

Street Address (P.O. Box Number is Not Acceptable)

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.

Country

81 Name

<u>B2</u>

83 City

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agent. I a	im familiar with, and accept the obligations of, S	Section 607,0505, Flo	orida Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent and title if a	pplicable (NOT	E: Registered Agent signature	required when reinstalling} DA	TE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	DELETE	1.1 TITLE		Change	Addition
NAME	KIPLINGER, AUSTIN H.		1.2 NAME			
STREET ADDRESS	16801 RIVER ROAD		1.3 STREET ADDRESS			
CITY-ST-ZIP	POOLESVILLE MD		1.4 CITY-ST-ZIP			
TITLE	PD	DELETE	2.1 TITLE	PD	X Change	Addition
NAME	-KIPLINGER, KNIGHT A.		2.2 NAME	Kiplinger, Knight A.		
STREET ADDRESS	5024 SEDGWICK ST NW		2.3 STREET ADDRESS	3630 Fordham Road, N.W.		
CITY-ST-ZIP	WASHINGTON DC		2. 4 CITY-ST-ZIP	Washington, D.C. 20016		
TITLE	VD	DÉLÉTE	3.1 TITLE		Change	Addition
NAME	KIPLINGER, TODD L		3.2 NAME			
STREET ADDRESS	4910 SCARSDALE ROAD		3.3 STREET ADDRESS			
CITY-\$T-ZIP	BETHESDA MD		3.4. CITY - ST - ZIP			
TITLE	VTD	DELETE	4.1 TITLE		☐ Change	Addition
NAME	WILKES, CORBIN M.		4. 2 NAME			
STREET ADDRESS	3200 N. WOODROW ST.		4.3 STREET ADDRESS			
CITY-\$1-ZIP	ARLINGTON VA		4.4 City-ST-ZiP			
TITLE	_V0	DELETE	5.1 TITLE		Change	Addition
NAME	THEODORE J MILLER		5.2 NAME			
STREET ADDRESS	5816 COLFAX AVE		5.3 STREET ADDRESS			
CITY-ST-ZIP	alexandria va		5.4 CITY- \$1 - ZIP			
TITLE	VO	DELETE	6.1 TITLE		Change	Addition
NAME	Broderick, Stephen J		6.2 NAME			
STREET ADDRESS	508 WATTS BRANCH PARKWAY		6.3 STREET ADDRESS			
PATY BY TID	POTOMAC MD		CACITY CT. 21D			

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

SIGNIATUDE:

Dan Davido

James K Buck

4/30/99

202 887-6442

ATTACHMENT TO FLORIDA ANNUAL REPORT

1998

OFFICERS & DIRECTORS

S/D MATTHEWS, GARY 5937 FRAZIER LANE MCLEAN, VA 22101