


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2005 08:00 AM
Secretary of State

DOCUMENT # 855132 1. Entity Name READER'S DIGEST LATINOAMERICA S.A.	
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Principal Place of Business ROARING BROOK ROAD PLEASANTVILLE, NY 10570	Mailing Address ROARING BROOK ROAD PLEASANTVILLE, NY 10570
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04262005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 52-1275836	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301
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**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent:

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD DUPREE, CLIFFORD H.R. READERS DIGEST ROAD PLEASANTVILLE, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS BRIZEL, MICHAEL A READER'S DIGEST ROAD PLEASANTVILLE, NY 10570
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPTD MAGILL, WILLIAM H. READER'S DIGEST ROAD PLEASANTVILLE, NY 10570
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AT LIEBMAN, BARRY M. READER'S DIGEST ROAD PLEASANTVILLE, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BRENNAN, MICHAEL A READER'S DIGEST RD PLEASANTVILLE, NY 10570
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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05/09/05-80028-011 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Bryan L. Brennan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/05 9/4/04 5312
Date Daytime Phone #