2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED OLAPR 15 PH 2: 42 SECRETARY OF STATE ARY OF STATE DOCUMENT # F03000003820 1. Entity Name WORLD BOOK EDUCATIONAL PRODUCTS, INC. Principal Place of Business Mailing Address 28800 CLEMENS ROAD 28800 CLEMENS ROAD WESTLAKE, OH 44145 WESTLAKE, OH 44145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04012004 CR2E034 (10/03) Cha-P City & State 4 FELNumber Applied For City & State 36-2364821 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 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. Signature, typed or printed name of registered agent and tide if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PCFO ☐ Delete Change TITLE TITLE Addition **500033723285** 04/23/04--01023--013 **150.00 SEMEISBERGER, KENNETH J NAME NAME STREET ADDRESS 28800 CLEMENS ROAD STREET ADDRESS CITY-ST-ZIP WESTLAKE, OH 44145 CITY-ST-ZIP VTD TITLE ☐ Delete TITLE Change Addition STEPHENS, WM. W.T. NAME NAME STREET ADDRESS 28800 CLEMENS ROAD STREET ADDRESS CITY - ST - /IP WESTLAKE, OH 44145 CITY - ST - ZIP Delete **X** Addition TITLE TITLE Change SCANLON, PATRICIA M NAME NAME GRETTA, JOHN W STREET ADDRESS 28800 CLEMENS ROAD STREET ADDRESS 28800 CLEMENS ROAD WESTLAKE, OH 44145 CITY-ST-ZIP CITY-ST-ZIP WESTLAKE, OH 44145 TITLE VASD Delete TITLE **X** Change OnitibhA | VSD SCANLON, PATRICIA M NAME NAME SCANLON, PATRICIA M STREET ADDRESS 28800 CLEMENS ROAD STREET ADDRESS 28800 CLEMENS ROAD CITY-ST-ZIP WESTLAKE, OH 44145 CITY-ST-ZIP WESTLAKE, OH 44145 TITLE VAS Delete TITLE Change Addition HAMBURG, MARC D NAME NAME STREET ADDRESS 28800 CLEMENS ROAD STREET ADDRESS CITY-ST-ZIP WESTLAKE, OH 44145 CITY-SI-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MARTIN, ROBERT C NAME NAME STREET ADDRESS 28800 CLEMENS ROAD STREET ADDRESS CHTY-ST-ZIP WESTLAKE, OH 44145 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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. JOHN GRETTA SIGNATURE: