## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: \_

## Sep 09, 2004 8:00 am Secretary of State DOCUMENT # F03000005377 09-09-2004 90004 013 \*\*\*550.00 PRIMEDIA MAGAZINES, INC. Principal Place of Business Mailing Address 54072088 C/O PRIMEDIA INC. 200 MADISON AVENUE NEW YORK, NY 10016 745 FIFTH AVENUE NEW YORK, NY 10151 2. Principal Place of Business 3. Mailing Address 6405 Flank Drive Suite, Apt. #, etc. Suite, Apt. #, etc. 08232004 CR2E034 (10/03) Chg-P 4. FELNumber Applied For City & State City & State PA Harrisbura 13-3616344 Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired USA ロルa Fee Required 7. Name and Address of New Registered Agent 5. Name and Address of Current Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 EAST PARK AVENUE TALLAHASSEE, FL 32301 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution. П Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. P/CEO **PCEO** Delete **✓** Addition TITLE TITLE Change Kelly P. Conlin MCCURDY, CHARLES G NAME NAME 48 Buckingham Street STREET ADDRESS 1158 FIFTH AVENUE STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10029 CITY-ST-ZIP <u>Cambridge</u>, MA 02138 SD ☐ Addition Delete TITLE ☐ Change CHELL, BEVERLY C NAME NAME STREET ADDRESS 125 CORY'S LANE STREET ADDRESS PORTSMOUTH, RI 02871 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FLYNN, MATTHEW NAME NAME 53 JOYCE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HARTSDALE, NY 10530 CITY-ST-ZIE C/D Delete Change **✓** Addition FERM, DAVID Dean B. Nelson NAME NAME 745 Fifth Avenue STREET ADDRESS 1 YARMOUTH ROAD STREET ADDRESS CITY-ST-ZIP ROWAYTON, CT 06853 CITY-ST-ZIP New York, MY 10151 CFO TITLE VCFO ☑ Delete TITLE ☐ Change Addition A KIRCHOFF, DAVID P NAME Kevin Neary NAME auo Madison Ave. STREET ADDRESS **5 SEAGATE ROAD** STREET ADDRESS DARIEN, CT 06820 CITY-ST-ZIP CITY-ST-ZIP New YORK, NY 10016 Change TITLE ☐ Delete TITLE ☐ Addition DISCEPOLO, MICHAELANNE C NAME STREET ADDRESS 46 WOLF HILL ROAD STREET ADDRESS MELVILLE, NY 11747 CITY-ST-ZIP CITY-ST-ZIP 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.

IG OFFICER OR DIRECTOR

**FILED** 

## AHachment



54072088 #F03000005377

## **MEMO**

August 23, 2004

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

Enclosed you will find the completed and executed 2004 Profit Annual Report and our check in the amount of \$550.00 to cover the filing fee for Primedia Magazines Inc., in the State of Florida.

If there are any problems with this submission or you have any questions, please contact me by phone at 717-671-4372 or by email at Fiona.Line-Miller@primedia.com.

Sincerely,

Fiona Line-Miller

Line In Milly

Tax Manager