

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **F93000000200 (6)**

1. Corporation Name

**DORLING KINDERSLEY FAMILY LIBRARY INC.**



Principal Place of Business

Mailing Address

**SOUTHLAND EXECUTIVE PARK  
7616 SOUTHLAND BLVD., SUITE 100  
ORLANDO FL 32809**

**SOUTHLAND EXECUTIVE PARK  
7616 SOUTHLAND BLVD., SUITE 100  
ORLANDO FL 32809**

3. Date Incorporated or Qualified  
**01/19/1993**

3a. Date of Last Report  
**05/01/1995**

2. Principal Place of Business

2a. Mailing Address

21 **Southland Exec. Park**

26 **Southland Exec. Park**

4. FEI Number

**59-3157011**

Applied For

Not Applicable

Suite, Apt. #, etc

22 **7800 Southland Blvd. Ste. 200**

27 **200/7800 Southland Blvd. Ste. 200**

5. Certificate of Status Desired

**\$8.75 Additional  
Fee Required**

City & State

23 **Orlando, FL**

City & State

28 **Orlando, FL**

6. Election Campaign Financing  
Trust Fund Contribution

**\$5.00 May Be  
Added to Fees**

Zip

24 **32809**

Country

25 **USA**

Zip

29 **32809**

Country

30 **USA**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LUCE, ALAN  
SOUTHLAND EXECUTIVE PARK  
7616 SOUTHLAND BLVD.  
ORLANDO FL 32809**

81 Name

82 **7800 Southland Blvd. Ste. 200**

83

84 City

**Orlando**

FL

85 Zip Code

**32809**

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.

SIGNATURE

Signature of person (not name of registered agent) if not a director

Signature of Registered Agent (signature required when not changing)

June 7, 1996

DATE

12. OFFICERS AND DIRECTORS

TITLE **VPD** ☐ DELETE  
NAME **LUCE, ALAN**  
STREET ADDRESS **7616 SOUTHLAND BLVD. STE 100**  
CITY-ST-ZIP **ORLANDO FL**

TITLE **P** ☐ DELETE  
NAME **KINDERSLEY, PETER**  
STREET ADDRESS **9 HENRIETTA STREET, COVENT GARDEN**  
CITY-ST-ZIP **LONDON, ENGLAND WC23 8PS**

TITLE **D** ☐ DELETE  
NAME **HARE, ROD D**  
STREET ADDRESS **9 HENRIETTA STREET, COVENT GARDEN**  
CITY-ST-ZIP **LONDON, ENGLAND WC23 8PS**

TITLE **D** ☐ DELETE  
NAME **GILL, PETER**  
STREET ADDRESS **9 HENRIETTA STREET, COVENT GARDEN**  
CITY-ST-ZIP **LONDON, ENGLAND WC23 8PS FL**

TITLE **D** ☒ DELETE  
NAME **STRONG, MIKE**  
STREET ADDRESS **9 HENRIETTA STREET, COVENT GARDEN**  
CITY-ST-ZIP **LONDON, ENGLAND WC23 8PS NY 10017**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 TITLE  
12 NAME  
13 STREET ADDRESS **7800 Southland Blvd. Ste. 200**  
14 CITY-ST-ZIP **Orlando, FL 32809**

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP ☐ Change ☐ Addition

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 7, 1996

DATE

407-857-5463

Daytime Phone #

CR2E034 (12/95)