

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 3:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000004212 (7)

1. Corporation Name

WORLD OF SCIENCE, INC.

Principal Place of Business

900 JEFFERSON ROAD, BLDG. 4
ROCHESTER NY 14623

Mailing Address

900 JEFFERSON ROAD, BLDG. 4
ROCHESTER NY 14623

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/15/1993

3a. Date of Last Report

02/16/1994

4. FEI Number

16-0963838

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of Now Registered Agent

01 Name

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

03

04 City

FL

05 Zip Code

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, typed or printed name of registered agent and title of agent)

(Signature, typed or printed name of registered agent and title of agent)

DATE

12. OFFICERS AND DIRECTORS

NAME	CT
NAME	KLAUCKE, FRED H
STREET ADDRESS	900 JEFFERSON RD., BLDG. 4
CITY, ST, ZIP	ROCHESTER NY 14623
NAME	DP
NAME	FROEHLER, JAMES J
STREET ADDRESS	900 JEFFERSON RD., BLDG. 4
CITY, ST, ZIP	ROCHESTER NY 14623
NAME	DS
NAME	CALLEN, RICHARD B
STREET ADDRESS	1081 LONG POND RD.
CITY, ST, ZIP	ROCHESTER NY 14626
NAME	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	CT D	☐ Change ☒ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
NAME		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
NAME		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
NAME		☐ Change ☒ Addition
NAME	ASS'T S	
STREET ADDRESS	CALLAHAN, CHARLES A	
CITY, ST, ZIP	900 JEFFERSON ROAD BLDG 4	
NAME	ROCHESTER NY 14623	☐ Change ☒ Addition
NAME	D	
STREET ADDRESS	JAMES, THOMAS A	
CITY, ST, ZIP	880 CARILLON PARKWAY	
NAME	ST. PETERSBURG FL 33733-2749	☐ Change ☒ Addition
NAME	D	
STREET ADDRESS	WUNDER, ROBERT S	
CITY, ST, ZIP	ONE FOUNTAIN PLAZA	
NAME	BUFFALO NY 14203	

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(2)(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 of changed or on an attachment with an addendum.

SIGNATURE: *Charles A. Callahan* CHARLES A CALLAHAN, ASS'T SEC 4/20/95

(716) 475-0100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR