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May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F94000001648 (4)

1. Corporation Name

LCC HOLDING COMPANY

Principal Place of Business

10 W. SECOND ST.
COURTHOUSE PLAZA, N.E.
DAYTON OH 45463

Mailing Address

C/O REED ELSEVIER
275 WASHINGTON ST.
NEWTON MA 02158-1646



3. Date Incorporated or Qualified

03/31/1994

3a. Date of Last Report

04/29/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

31-1401551

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. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85 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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME SIEGEL, IRA T.
STREET ADDRESS 16766 KNIGHTSBRIDGE LANE
CITY - ST - ZIP DELRAY BCH. FL 33484

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE SD ☐ DELETE
NAME ANDREOZZI, LOUIS J.
STREET ADDRESS 3 HUNTING MEADOW CT.
CITY - ST - ZIP ROCKAWAY TURNPIKE NJ 07866

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE T ☐ DELETE
NAME LANG, VERA
STREET ADDRESS 160 WINSOR WAY
CITY - ST - ZIP BERKELEY HEIGHTS NJ 07922

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE ATAS ☐ DELETE
NAME FONTAINE, CHARLES P
STREET ADDRESS 275 WASHINGTON ST.
CITY - ST - ZIP NEWTON MA 02158

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE VPD ☐ DELETE
NAME BROWN, PAUL
STREET ADDRESS 118 SPIEA DR.
CITY - ST - ZIP LONDON, UK. WIA1EJ

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE AS ☒ DELETE
NAME WOLF, S S
STREET ADDRESS 9443 SPRINGBORO PIKE
CITY - ST - ZIP MIAMISBURG OH 45342

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME D
6.3 STREET ADDRESS NIGEL STAPLETON
6.4 CITY - ST - ZIP 6 CHESTERFIELD GARDENS
LONDON, WIA1EJ

14. I do 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 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: Charles P. Fontaine CHARLES P. FONTAINE 4/26/97 617-558-4924
ASSISTANT TREASURER / ASSISTANT SECRETARY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date Daytime Phone # 0000564

CR2E034 (9/96)