

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F94000003274

FILED
Apr 16, 2003
Secretary of State

Entity Name: FOLLETT CORPORATION

Current Principal Place of Business:

P.O. BOX D
EASTON, PA 18044

New Principal Place of Business:

Current Mailing Address:

P.O. BOX D
EASTON, PA 18044

New Mailing Address:

FEI Number: 22-1635318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILBERG, BARRETT S
358 WOOD DOVE AVE
TARPON SPRINGS, FL 34688

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: FOLLETT, STEVEN R
Address: 801 CHURCH LANE
City-St-Zip: EASTON, PA 18040 US

Title: D () Delete
Name: CONTI, ROBERT F
Address: 2970 MENDON RD
City-St-Zip: CUMBERLAND, RI

Title: DS () Delete
Name: WEILER, KARL M
Address: 342 TREETOP TRAIL
City-St-Zip: BUCK HILL FALLS, PA 18323 US

Title: D () Delete
Name: NELSON, J S
Address: 860 SILVERTHORNE TRAIL
City-St-Zip: HIGHLAND VILLAGE, TX 75077

Title: VD () Delete
Name: BRYSON, ROBERT R JR
Address: PO BOX D
City-St-Zip: EASTON, PA

Title: D () Delete
Name: KRESKY, RICHARD S
Address: PO BOX 87, HIGHWAY 13, #10280
City-St-Zip: PORT WING, WI 54865 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN R. FOLLETT

CPD

04/16/2003

Electronic Signature of Signing Officer or Director

Date