

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000004319 (7)

1. Corporation Name

CHILDREN'S WORLD LEARNING CENTERS, INC.



Principal Place of Business

573 PARK POINT DRIVE
GOLDEN CO 80401

Mailing Address

573 PARK POINT DRIVE
GOLDEN CO 80401

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

08/22/1996

3a. Date of Last Report

4. FEI Number

75-1304369

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

10. Name and Address of New Registered Agent

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

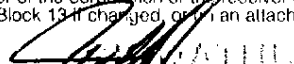
12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	LARSON, DUANE V	
STREET ADDRESS	573 PARK POINT DRIVE	
CITY-ST-ZIP	GOLDEN CO 80401	
TITLE	EV	☐ DELETE
NAME	KING, KAREN S	
STREET ADDRESS	573 PARK POINT DRIVE	
CITY-ST-ZIP	GOLDEN CO 80401	
TITLE	EV	☐ DELETE
NAME	TURPENOFF, RICK	
STREET ADDRESS	573 PARK POINT DRIVE	
CITY-ST-ZIP	GOLDEN CO 80401	
TITLE	V	☐ DELETE
NAME	ROSEN, JOHN	
STREET ADDRESS	573 PARK POINT DRIVE	
CITY-ST-ZIP	GOLDEN CO 80401	
TITLE	V	☒ DELETE
NAME	MAGGIO, KAREN	
STREET ADDRESS	573 PARK POINT DRIVE	
CITY-ST-ZIP	GOLDEN CO 80401	
TITLE	V	☒ DELETE
NAME	MOORE, KIMBERLY	
STREET ADDRESS	573 PARK POINT DRIVE	
CITY-ST-ZIP	GOLDEN CO 80401	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	DH RUSTELL BARKER
5.3 STREET ADDRESS	1101 MARKET ST.
5.4 CITY-ST-ZIP	PHILM, PA 19107
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	VP O'HARA, MICHAEL
6.3 STREET ADDRESS	1101 MARKET STREET
6.4 CITY-ST-ZIP	PHILM, PA 19107

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 in an attachment with an address.

SIGNATURE: 

4/28/97 215238-3112

CR2E034 (9/96)