

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N92000000184 (3)

1. Corporation Name
CHILDREN'S NEWSPAPER, INC.



Principal Place of Business: **349 GRANADA ROAD W. PALM BEACH FL 33401**
Mailing Address: **PO BOX 7523 WEST PALM BEACH FL 33405**

3. Date Incorporated or Qualified 11/03/1992	3a. Date of Last Report 06/21/1995
4. FEI Number 65-0372496	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business		2a. Mailing Address	
21	26	Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23	28	Zip	
24	25	29	30
Country		Country	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PRUITT, ALISON 349 GRANADA ROAD WEST PALM BEACH FL 33401				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: *Alison Pruitt* DATE: **5-28-96**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92			
TITLE	ED	<input type="checkbox"/> DELETE		11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PRUITT, ALLISON			12 NAME			
STREET ADDRESS	349 GRANADA ROAD			13 STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL 33401			14 CITY-ST-ZIP			
TITLE	PT	<input type="checkbox"/> DELETE		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	TUFTS, THOMAS MARTIN			22 NAME			
STREET ADDRESS	1400 PALM CIRCLE			23 STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL			24 CITY-ST-ZIP			
TITLE	TT	<input type="checkbox"/> DELETE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	STUMP, MITCHELL			32 NAME			
STREET ADDRESS	1555 PALM BEACH LAKES BLVD, #1400			33 STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL			34 CITY-ST-ZIP			
TITLE	T	<input type="checkbox"/> DELETE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SIMON, BREN			42 NAME			
STREET ADDRESS	1100 S. OCEAN BLVD			43 STREET ADDRESS			
CITY-ST-ZIP	MARALAPAN FL			44 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				52 NAME			
STREET ADDRESS				53 STREET ADDRESS			
CITY-ST-ZIP				54 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				62 NAME			
STREET ADDRESS				63 STREET ADDRESS			
CITY-ST-ZIP				64 CITY-ST-ZIP			

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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)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Alison Pruitt* DATE: **6-11-96** (561) 659-6884

CR2E037 (12/95)