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FILED
Apr 28 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P00129

(7)

1. Corporation Name

SCHOLASTIC BOOK FAIRS, INC.

Principal Place of Business

1080 GREENWOOD BLVD
LAKE MARY FL 32746
US

Mailing Address

1080 GREENWOOD BLVD.
LAKE MARY FL 32746
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1983

4. FEI Number

06-1089443

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 1080 Greenwood Blvd

Suite, Apt. #, etc.

22 City & State

23 Lake Mary, FL

24 Zip

25 Country

32746

USA

2a. Mailing Address

26 1080 Greenwood Blvd

Suite, Apt. #, etc.

27 City & State

28 Lake Mary FL

29 Zip

32746

30 Country

USA

9. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYES ST
STE 105
TALLAHASSEE FL 32301

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 ☐ DELETE

NAME D MARCUS, BARBARA
STREET ADDRESS 555 BROADWAY 10TH FLOOR
CITY-ST-ZIP NEW YORK NY

TITLE ☒ DELETE

NAME SD ALLISON, LYNETTE E.
STREET ADDRESS 555 BROADWAY 10TH FLOOR
CITY-ST-ZIP NEW YORK NY

TITLE ☐ DELETE

NAME MARZANO VINNIE
STREET ADDRESS 1290 WALL ST WEST
CITY-ST-ZIP LYNHURST NJ

TITLE ☐ DELETE

NAME D SPAULDING, RICHARD M.
STREET ADDRESS 555 BROADWAY
CITY-ST-ZIP NEW YORK NY

TITLE ☒ DELETE

NAME VD BISCHOFF, FREDERIC J.
STREET ADDRESS 555 BROADWAY
CITY-ST-ZIP NEW YORK NY

TITLE ☐ DELETE

NAME C PHILLIPS, NICK
STREET ADDRESS 1080 GREENWOOD BLVD.
CITY-ST-ZIP LAKE MARY FL

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

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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:

N. H. Phillips, Nick Phillips 4/10/98

CR2E034 (10/97)