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**CORPORATION
ANNUAL REPORT
1995**



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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P28447

(1)

1. Corporation Name

EDUCATION FORUM, INC.

Principal Place of Business

Mailing Address

9040 CARMEL MOUNTAIN RD., SUITE F
SAN DIEGO CA 92129

9040 CARMEL MOUNTAIN RD., SUITE F
SAN DIEGO CA 92129

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/06/1990

3a. Date of Last Report

04/27/1994

4. FEI Number

33-0367493

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRAND, LEONARD
2434 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME CLARK, R. BRUCE
STREET ADDRESS 9340 CARMEL MOUNTAIN RD.
CITY - ST - ZIP SAN DIEGO CA

11 TITLE ☐ Change ☐ Addition

TITLE SD
NAME CLARK, SHERI M.
STREET ADDRESS 9457 ALDABRA COURT
CITY - ST - ZIP SAN DIEGO CA

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

TITLE VTD
NAME FELDMAN, MARIE
STREET ADDRESS 13740 PASEO CARDIEL
CITY - ST - ZIP SAN DIEGO CA

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

55 CITY - ST - ZIP

56 CITY - ST - ZIP

57 CITY - ST - ZIP

58 CITY - ST - ZIP

59 CITY - ST - ZIP

60 CITY - ST - ZIP

61 CITY - ST - ZIP

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 110.07(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 017, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, upon an attachment with an address.

SIGNATURE:

R. Bruce Clark
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. Bruce Clark 4/24/95 (619) 484-9666
Date Date of Filing