FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400001501084
-05/30/95--01023--019
*****130.00 *****130.00
DO NOT WRITE IN THIS SPACE

DOCUMENT # P30493 (1)

1. Corporation Name
WORLD EDUCATION, INC.

Principal Place of Business
210 LINCOLN STREET
BOSTON MA 02111

Mailing Address
210 LINCOLN STREET
BOSTON MA 02111

3. Date Incorporated or Qualified: 08/01/1990
3a. Date of Last Report: 03/28/1994
4. FEI Number: 13-1804349 — Applied For ☐ Not Applicable ☐

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

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. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent
BROWN, STACY DANIEL
110 SHEPHERD TRAIL
LONGWOOD FL 32752-9632

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 (signed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	LAMSTEIN, JOEL H.	12 NAME	400001501084
STREET ADDRESS	210 LINCOLN ST.	13 STREET ADDRESS	-05/30/95--01023--020
CITY ST ZIP	BOSTON MA	14 CITY ST ZIP	*****25.00 *****25.00
TITLE	V	21 TITLE	☐ Change ☐ Addition
NAME	COMINGS, JOHN P.	22 NAME	
STREET ADDRESS	210 LINCOLN ST.	23 STREET ADDRESS	
CITY ST ZIP	BOSTON MA	24 CITY ST ZIP	
TITLE	S	31 TITLE	☐ Change ☐ Addition
NAME	MAYO-SMITH, RICHMOND	32 NAME	
STREET ADDRESS	156 MOUNT VERNON ST.	33 STREET ADDRESS	
CITY ST ZIP	BOSTON MA	34 CITY ST ZIP	
TITLE	S	41 TITLE	☐ Change ☐ Addition
NAME	~~MAYO-SMITH, RICHOMND~~	42 NAME	
STREET ADDRESS	~~156 MOUNT VRNON ST~~	43 STREET ADDRESS	
CITY ST ZIP	~~BOSTON MA~~	44 CITY ST ZIP	
TITLE	T	51 TITLE	T ☒ Change ☐ Addition
NAME	GOLDBERG, LELAND B	52 NAME	Goldberg, Leland B.
STREET ADDRESS	ONE POST OFFICE SQ 28 FL	53 STREET ADDRESS	270 Congress Street
CITY ST ZIP	BOSTON MA	54 CITY ST ZIP	Boston, MA 02210
TITLE	C	61 TITLE	☐ Change ☐ Addition
NAME	LEVY, GERALD DUN	62 NAME	
STREET ADDRESS	257 PARK AVE S	63 STREET ADDRESS	
CITY ST ZIP	NEW YORK NY	64 CITY ST ZIP	

RECEIVED BY MAY 1.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not [illegible] information 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 [illegible] 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: John P Comings 4-17-95 6174829485
SIGNATURE AND TYPED OR PRINTED NAME OF VOTING OFFICER OR DIRECTOR — Date — Daytime Phone #

0073212