2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 AM
Secretary of State

DOCUMENT# P30493

Entity Name: WORLD EDUCATION, INC.

Current Principal Place of Business:

44 FARNSWORTH STREET
BOSTON, MA 02210

New Principal Place of Business:

Current Mailing Address:

44 FARNSWORTH STREET
BOSTON, MA 02210

New Mailing Address:

FEI Number: 13-1804349 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SILVERSTONE, JON
28605 SW 172 ST
HOLMSTEAD, FL 33030 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	LAMSTEIN, JOEL H.,	
Address:	44 FARNSWORTH STREET	
City-St-Zip:	BOSTON, MA 02210	
Title:	D	( ) Delete
Name:	FOLTZ, WILLIAM	
Address:	43 LINCOLN STREET	
City-St-Zip:	NEW HAVEN, CT 06511	
Title:	D	( ) Delete
Name:	COLLETTA, NAT	
Address:	44 FARNSWORTH ST	
City-St-Zip:	BOSTON, MA	
Title:	T	( ) Delete
Name:	GOLDBERG, LELAND B,	
Address:	44 FARNSWORTH STREET	
City-St-Zip:	BOSTON, MA 02210	
Title:	C	( ) Delete
Name:	COVEY, JANE G	
Address:	44 FARNSWORTH STREET	
City-St-Zip:	BOSTON, MA 02210	
Title:	S	( ) Delete
Name:	MAYO-SMITH, RICHMOND	
Address:	156 MOUNT VERNON STREET	
City-St-Zip:	BOSTON, MA 02108	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	C	(X) Change ( ) Addition
Name:	TROUT, CHARLES H	
Address:	44 FARNSWORTH STREET	
City-St-Zip:	BOSTON, MA 02210	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOEL H. LAMSTEIN PD 05/01/2002

Electronic Signature of Signing Officer or Director — Date