2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30493

Entity Name: WORLD EDUCATION, INC.

FILED Feb 15, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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44 FARNSWORTH STREET BOSTON, MA 02210

Current Mailing Address: New Mailing Address:

44 FARNSWORTH STREET BOSTON, MA 02210

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition LAMSTEIN, JOEL H., LAMSTEIN, JOEL H Name: Name: 44 FARNSWORTH STREET Address: 44 FARNSWORTH STREET Address: BOSTON, MA 02210

City-St-Zip: BOSTON, MA 02210 City-St-Zip: (X) Change () Addition Title: Title: S/D

() Delete Name: FOLTZ, WILLIAM Name: FOLTZ, WILLIAM Address: 43 LINCOLN STREET Address: 43 LINCOLN STREET City-St-Zip: NEW HAVEN, CT 06511 City-St-Zip: NEW HAVEN, CT 06511

Title: () Delete Title: () Change () Addition

COLLETTA, NAT Name: Name: 44 FARNSWORTH ST Address: Address: City-St-Zip: BOSTON, MA City-St-Zip:

() Delete Title: Title: (X) Change () Addition Name: GOLDBERG, LELAND B, Name: GOLDBERG, LELAND B 44 FARNSWORTH STREET 44 FARNSWORTH STREET Address: Address:

City-St-Zip: BOSTON, MA 02210 City-St-Zip: BOSTON, MA 02210

Title: Title: () Delete () Change () Addition

TROUT, CHARLES H Name: Name: 44 FARNSWORTH STREET Address: Address: City-St-Zip: BOSTON, MA 02210 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

MAYO-SMITH, RICHMOND O'REGAN, FRED Name: Name: Address: 156 MOUNT VERNON STREET Address: 411 MAIN STREET

YARMOUTH PORT, MA 02675 BOSTON, MA 02108 City-St-Zip: 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 P/D 02/15/2004