

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P35902 (6)

1. Corporation Name
WASATCH EDUCATION SYSTEMS CORPORATION



Principal Place of Business

5250 S 300 W
101
SALT LAKE CITY UT 84107
US

Mailing Address

5250 S 300 W
101
SALT LAKE CITY UT 84107-7926
US

3. Date Incorporated or Qualified
10/11/1991

3a. Date of Last Report
08/21/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

87-1458433

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

TAYLOR, JEANINE
200 ST. ANDREWS BLVD., UNIT 3702
WINTER PARK FL 32792

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	D	DELETE
NAME	POE, CAROLYN	
STREET ADDRESS	2000 ALAMEDA DE LAS PULAGAS	
CITY - ST - ZIP	SAN MATEO CA	
TITLE	DC	DELETE
NAME	MORRIS, BARBARA	
STREET ADDRESS	5250 SO 300 WEST	
CITY - ST - ZIP	SALT LAKE CITY UT	
TITLE	D	DELETE
NAME	GEORGE, GREG	
STREET ADDRESS	2000 ALAMEDA DE LAS PULG	
CITY - ST - ZIP	SAN MATEO CA	
TITLE	DS	DELETE
NAME	KEIMER, JEFF	
STREET ADDRESS	702 MARSHALL ST	
CITY - ST - ZIP	REDWOOD CA	
TITLE	V	DELETE
NAME	BROWN, RALPH	
STREET ADDRESS	5250 SOUTH 300 WEST, #101	
CITY - ST - ZIP	SALT LAKE CITY, UT	
TITLE	V	DELETE
NAME	HAMIL, CAROL	
STREET ADDRESS	5250 S 300 W #101	
CITY - ST - ZIP	SALT LAKE CITY UT	

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 do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)