

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90097 011 ***158.75

DOCUMENT # P93000057810

1. Corporation Name

AUDIO BOOK CLUB, INC.

Principal Place of Business

2295 CORPORATE BLVD. NW
SUITE 222
BOCA RATON FL 33431

Mailing Address

P.O. BOX 5002
BOCA RATON FL 33431-0802

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/16/1993

4. FEI Number

65-0429858

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 owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

HERRICK, NORTON
2295 CORPORATE BLVD, NW
SUITE 222
BOCA RATON FL 33431

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 CEO
NAME HERRICK, NORTON
STREET ADDRESS 2295 CORPORATE BLVD NW SUITE 222
CITY-ST-ZIP BOCA RATON FL

TITLE EVPD
NAME HERRICK, MICHAEL
STREET ADDRESS 2295 CORPORATE BLVD. NW SUITE 222
CITY-ST-ZIP MORRISTOWN NJ 07960

TITLE COOD
NAME HERRICK, HOWARD
STREET ADDRESS 2295 CORPORATE BLVD NW SUITE 222
CITY-ST-ZIP BOCA RATON FL

TITLE P
NAME FABER, JESSE
STREET ADDRESS 20 COMMUNITY PL
CITY-ST-ZIP MORRISTOWN NJ 07960

TITLE CFO
NAME LEVY, JOHN
STREET ADDRESS 20 COMMUNITY PL
CITY-ST-ZIP MORRISTOWN NJ 07960

TITLE D
NAME ABREMS, ROY
STREET ADDRESS 15 LOWELL CT.
CITY-ST-ZIP TEANOCK NJ 07666

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CO-CEO/D/S ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE CO-CEO/D/S ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 20 COMMUNITY PLACE
2.4 CITY-ST-ZIP MORRISTOWN NJ 07960

3.1 TITLE EVPD/D/S ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 20 Community Place
3.4 CITY-ST-ZIP MORRISTOWN NJ 07960

4.1 TITLE P/D ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE EVP and CFO ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Abrams, Roy ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

COCEO 4/12/99

Date

Daytime Phone #

973-5399528

CR2E034 (1/98)