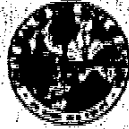


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 10 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000058251 (7)

1. Corporation Name

THE ASPEN GROUP, INC.

Principal Place of Business

Mailing Address

15501 BRUCE B. DOWNS BOULEVARD
TAMPA FL 33569

15501 BRUCE B. DOWNS BOULEVARD
TAMPA FL 33569

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

08/08/1994

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number

Applied For

65-0541891

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$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

10. Name and Address of New Registered Agent

WOLFE, RANDOLPH J
201 NORTH FRANKLIN STREET
SUITE 2100
TAMPA FL 33601

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME PERR, JOEL S
STREET ADDRESS ~~15501 BRUCE B. DOWNS BOULEVARD~~
CITY - ST - ZIP ~~TAMPA FL 33569~~

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS SIX PPG PLACE; SUITE 1110
1.4 CITY - ST - ZIP PITTSBURGH, PA 15222

TITLE D
NAME FERREIRA, RANDY X
STREET ADDRESS 15501 BRUCE B. DOWNS BOULEVARD
CITY - ST - ZIP TAMPA FL 33569

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE D
NAME DIFRANGO, JERRY GERALD W.
STREET ADDRESS ~~15501 BRUCE B. DOWNS BOULEVARD~~
CITY - ST - ZIP ~~TAMPA FL 33569~~

3.1 TITLE Change Addition
3.2 NAME DIFRANGO, GERALD W.
3.3 STREET ADDRESS SIX PPG PLACE; SUITE 1110
3.4 CITY - ST - ZIP PITTSBURGH, PA 15222

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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; that I am 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:

Joel S. Perr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Joel S. Perr

April 4, 1994

(412)
288-3900

Date

(Type in Block 8)