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FILED  
Apr 24 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 # P94000089973 (9)

1. Corporation Name  
KW PUBLISHING AND COMPUTER TRAINING, INC.

Principal Place of Business

Mailing Address

2194 MAIN STREET  
#K  
DUNEDIN FL 34699  
US

P.O. BOX 10266  
ST. PETERSBURG FL 33733-0266  
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 2194 Main Street

22 City & State

27 Suite K

23 Zip Country

28 Dunedin FL

24 Zip Country

29 34698 30 USA

3. Date Incorporated or Qualified  
12/12/1994

3a. Date of Last Report  
04/05/1996

4. FEI Number  
59-3288738

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

10. Name and Address of New Registered Agent

WORKMAN, JAMES J  
13432 ANDOVA DRIVE  
LARGO FL 34644

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 NAME STREET ADDRESS CITY- ST- ZIP

P SCOTT G. KELBY  
2194 MAIN STREET #K  
DUNEDIN FL

TITLE NAME STREET ADDRESS CITY- ST- ZIP

V JAMES J. WORKMAN  
13432 ANDOVA DR.  
LARGO FL

TITLE NAME STREET ADDRESS CITY- ST- ZIP

T JEAN A. KENDRA  
13432 ANDOVA DR.  
LARGO FL

TITLE NAME STREET ADDRESS CITY- ST- ZIP

S KALEBRA, KELBY  
2194 MAIN ST. #K  
DUNEDIN FL

TITLE NAME STREET ADDRESS CITY- ST- ZIP

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TITLE NAME STREET ADDRESS CITY- ST- ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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:

JEAN A. KENDRA

4/1/97 (813) 733-1235

CR2E034 (9/96)