

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
2000



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 NOV 13 AM 9:19

DOCUMENT # F98000001292

1. Corporation Name

Argosy Education Group, Inc.

Principal Place of Business

20 SOUTH CLARK STREET, SUITE 300  
CHICAGO IL 60603

Mailing Address

20 SOUTH CLARK STREET, SUITE 300  
CHICAGO IL 60603

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/06/1998

4. FEI Number

36-2855674

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

9. Name and Address of Current Registered Agent

NRAI Services, Inc.  
526 E. Park Ave.  
Tallahassee, FL 32301

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME O'DONNELL, HAROLD  
STREET ADDRESS 875 NORTH LASALLE STREET  
CITY-ST-ZIP CHICAGO IL 60610

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE V ☒ DELETE

NAME WYSE, BENJAMIN  
STREET ADDRESS 20 SOUTH CLARK STREET  
CITY-ST-ZIP CHICAGO IL 60603

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE SD ☒ DELETE

NAME MANGUM, RONALD  
STREET ADDRESS 35 EAST WACKER DRIVE  
CITY-ST-ZIP CHICAGO IL 60601

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE TC ☐ DELETE

NAME MARKOVITZ, MICHAEL C  
STREET ADDRESS 20 SOUTH CLARK STREET  
CITY-ST-ZIP CHICAGO IL 60603

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME HERST, THEODORE J  
STREET ADDRESS 1319 TRAPP LANE  
CITY-ST-ZIP WINNETKA IL 60093

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

CFD  
CHARLES GRUDOWSKI  
20 S. CLARK, 3RD FLOOR  
CHICAGO IL 60603

Change

Addition

Change

Addition

Change

Addition

Change

Addition

Change

Addition

14. I 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 the 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/00 312-279-3501

(7)

**2000 Uniform Business Report (UBR)**  
**American Schools of Professional Psychology Inc.**  
**Document #F98000001292**

12. Additional Information

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Knab, Karen

20 South Clark Street, Third Floor  
Chicago, IL 60603

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Mercer, Michael W.

20 South Clark Street, Third Floor  
Chicago, IL 60603

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Shiner, Kalman K.

20 South Clark Street, Third Floor  
Chicago, IL 60603

D

Simmons, Leslie M.

20 South Clark Street, Third Floor  
Chicago, IL 60603



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Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

Enclosed is the annual report for Argosy Education Group, Inc. It includes the report form, the filing fee of \$150.00 and \$8.75 for a certificate of status, for a total fee of \$158.75.

This report was originally filed in May of this year. Attached are copies of the original filing and the check. Unfortunately, this information was not received by your office. Your office has advised that submitting this information, along with the original filing fee, would be sufficient for reinstatement.

Thank you for your assistance in this matter. If you have additional concerns or need further information, please contact me at 312-279-3818.

Sincerely,

A handwritten signature in cursive script that reads "Bonnie Shadid".

Bonnie Shadid  
Director of Educational Compliance