

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000061991

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** NAPLES INTERNATIONAL COALITION FOR HIGHER EDUCATION, LLC

**Current Principal Place of Business:**

28000 SPANISH WELLS BLVD  
BOX 102  
BONITA SPRINGS, FL 34135 US

**New Principal Place of Business:**

**Current Mailing Address:**

28000 SPANISH WELLS BLVD  
BOX 102  
BONITA SPRINGS, FL 34135 US

**New Mailing Address:**

3 CENTENNIAL DRIVE  
PEABODY, MA 01960 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BECKWITH, C. G JR.  
28000 SPANISH WELLS BLVD  
BOX 102  
BONITA SPRINGS, FL 34135 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BECKWITH, C. G JR  
Address: 28000 SPANISH WELLS BLVD, BOX 102  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM  
Name: CARLSON, BRYAN E  
Address: 3 CENTENIAL DRIVE  
City-St-Zip: PEABODY, MA 01960

Title: MGRM  
Name: MATTHEWS, GEORGE J  
Address: 3 CENTENIAL DRIVE  
City-St-Zip: PEABODY, MA 01960

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRYAN E. CARLSON                      MGRM                      04/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date