


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 27, 2006 8:00 am**  
**Secretary of State**

06-27-2006 90036 002 \*\*\*\*61.25

**DOCUMENT # N05000004469**

1. Entity Name  
 UNIVERSITY COLLEGE OF THE CARIBBEAN FOUNDATION - U.S., INC.



Principal Place of Business  
 8936 W. FLAGLER ST.  
 BUILDING 27, UNIT 214  
 MIAMI, FL 33174

Mailing Address  
 8936 W. FLAGLER ST.  
 BUILDING 27, UNIT 214  
 MIAMI, FL 33174

40097187



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

05152006 Chg-NP CR2E037 (4/06)

City & State

4. FEI Number  
 06-1746554

Applied For  
 Not Applicable

City & State

Zip Country

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ADAMS, WINSTON  
 8936 W. FLAGLER ST.  
 BUILDING 27, UNIT 214  
 MIAMI, FL 33174

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

**Make check payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHRM MORGAN, HENLEY DR 85 WEST ROAD, TRENCH TOWN KINGSTON 12, JAMAICA W.I., <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCHR CUNNINGHAM, CHAD SEYMOUR PARK STE 8A 2 SEYMOUR AVENUE KINGSTON 10, JAMAICA W.I., <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BARRETT, WESLEY 1 LILLEY DRIVE, P.O. BOX 866 SANTA CRUZ PO ST ELIZABETH JAMAICA W.I., <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EX-D STEGER, TRISH 25 BRIDGEMOUNT HEIGHTS KINGSTON 8, JAMAICA W.I., <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, GERALDINE 34 OLD HOPE ROAD KINGSTON 5, JAMAICA W.I., <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, WINSTON 8936 W. FLAGLER ST. BLDG 27, UNIT 214 MIAMI, FL 33174 <input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Please see attached.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_ *June 16 2006* 876-853-1114  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 40097187

#FC105000004469

UNIVERSITY COLLEGE OF THE CARIBBEAN FOUNDATION - U.S., INC.  
2006 Annual Report  
EIN: 06-1746554  
Attachments Page 1

Question 10. Officers & Directors

<u>Name</u>	<u>Title</u>	<u>Address</u>
David Wan	Treasurer	52-60 Grenada Crescent Kingston 5 Jamaica, W.I.
Kelly Collini	Director	3345 Juniper Drive Laramie, WY 82070
Dr. Velma Hamilton-Brown	Director	17 Seaview Avenue Kingston Jamaica, W.I.
Courtney Jackson	Director	6 Belmont Road Kingston 5 Jamaica, W.I.
George Phillips	Hon. Director	33 ½ Half-Way-Tree Road Kingston 5 Jamaica, W.I.
Mark Pritchett	Director	40-42 ½ Beachwood Kingston 5 Jamaica, W.I.
Michael D. Schectman	Director	PO Box 1514 Helena, MT 59624
Dr. Brian Smith	Director	1004 Ervin Street St. Augustine, FL 32086

ATTACHMENT  
Hurwit & Associates  
*Legal counsel for philanthropy and the nonprofit sector*

www.hurwitassociates.com

40097187  
# N0500000 4469

1150 Walnut Street  
Newton, Massachusetts 02461  
Tel (617) 630-6900  
Fax (617) 928-3441  
Email: info@hurwitassociates.com

June 22, 2006

Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

Re: University College of the Caribbean Foundation – U.S., Inc.  
2006 Annual Report

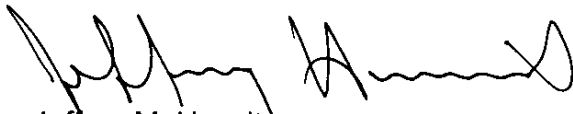
Dear Sir or Madam:

Enclosed please find the following submitted on behalf of the above-named organization:

1. 2006 Not-for-Profit Corporation Annual Report
2. Filing Fee in the amount of \$61.25

Should you have any questions about any of the above, please do not hesitate to contact me.

Sincerely,



Jeffrey M. Hurwit

JMH:dh

Enclosures

cc: Winston Adams  
Trish Steger