FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT
1997

FILED
Apr 24 1997 8:00am
Secretary of State

DOCUMENT # P96000011851 (8)

NICENE SCHOOLS INTERNATIONAL, INC.

Principal Place of Business
INCORPORATOR, WRIGHT, MORRIS & ARTHUR
4501 TAMIAI TRAIL NORT, SUITE 400
NAPLES, FL 33940

Mailing Address
INCORPORATOR, WRIGHT, MORRIS & ARTHUR
4501 TAMIAI TRAIL NORT, SUITE 400
NAPLES, FL 34103-2013

2. Principal Place of Business
2a. Mailing Address
2b. City & State
2c. Zip Country

3. Date Incorporated or Qualified
02/07/1996

4. FEI Number
65-0649778

5. Certificate of Status Desired
$8.75 Additional Fee Required

6. Election Campaign Financing
$5.00 May Be Added To Fees

7. This corporation has liability for intangible tax under s. 199.035,
Florida Statutes
Yes No

9. Name and Address of Current Registered Agent
WILSON, GARY K
4501 TAMIAI TRAIL NORT, SUITE 400
NAPLES, FL 33940

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. Zip Code

11. Pursuant to the provisions of Sections 607.0501 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. They accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0502, Florida Statutes.

SIGNATURE
Bob W. Moore

12. Officers and Directors

<table>
<thead>
<tr>
<th>TITLE</th>
<th>NAME</th>
<th>STREET ADDRESS</th>
<th>CITY, ST. ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>D</td>
<td>EDGAR, PAUL</td>
<td>150 W HIGH ST SOMERSWORTH NH 03878</td>
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</tr>
<tr>
<td>D</td>
<td>BARTELS, WELLINGTON P III</td>
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<td>CLARK, THOMAS III</td>
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13. Additions/Changes to Officers and Directors in 12

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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), 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: Bob W. Moore

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