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

**PROFIT CORPORATION ANNUAL REPORT 1998**

**FLORIDA DEPARTMENT OF STATE**

**Sandra B. Northam**

Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #: P96000011851 (8)**

**NICENE SCHOOLS INTERNATIONAL, INC.**

**Principal Place of Business**

<table>
<thead>
<tr>
<th>Name</th>
<th>Mailing Address</th>
<th>Suite Apt.</th>
<th>City &amp; State</th>
<th>Zip</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>WORTER, WRIGHT, MORRIS &amp; ARTHUR</td>
<td>WORTER, WRIGHT, MORRIS &amp; ARTHUR</td>
<td>4501 TAMAMI TRAIL NORTH, SUITE 400</td>
<td>NAPLES FL 33940</td>
<td>4501 TAMAMI TRAIL NORTH, SUITE 400</td>
<td>NAPLES FL 33940</td>
</tr>
</tbody>
</table>

**2. Principal Place of Business**

<table>
<thead>
<tr>
<th>Suite Apt.</th>
<th>City &amp; State</th>
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</tr>
</tbody>
</table>

**3. Date Incorporated or Qualified**

02/07/1996

**4. FEIT Number**

65-0649778

Applied For: Not Applicable

**5. Certificate of Status Desired**

$8.75 Additional Fee Required

**6. Election Campaign Financing**

$5.00 May Be Added to Fees

**7. This corporation owes or has paid the current year intangible personal property tax due June 30: Yes No**

**8. Name and Address of Current Registered Agent**

WILSON, GARY K

4501 TAMAMI TRAIL NORTH, SUITE 400

NAPLES FL 33940

**9. Name and Address of New Registered Agent**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 City

84 Zip Code

FL

85 Zip Code

**10. Pursuant to the provisions of Sections 607 0002 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 0005, Florida Statutes.**

**SIGNATURE**

Signature of registered agent or officer filing

**DATE**

**11. Officers and Directors**

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Address</th>
<th>City- ST-ZP</th>
</tr>
</thead>
<tbody>
<tr>
<td>EDOAR, PAUL</td>
<td>D</td>
<td>150 W HIGH ST</td>
<td>SOMERSWORTH NH 03878</td>
</tr>
<tr>
<td>BARTELS, WELLINGTON P III</td>
<td>D</td>
<td>150 W HIGH STREET</td>
<td>SOMERSWORTH NH 03878</td>
</tr>
<tr>
<td>CLARK, THOMAS III</td>
<td>D</td>
<td>150 W HIGH STREET</td>
<td>SOMERSWORTH NH 03878</td>
</tr>
</tbody>
</table>

**12. Additions/Changes to Officers and Directors in 12**

Scott, Otto

828 S. 299th PL

Federal Way, WA 98003

McIntyre, Ellsworth

6075 Pelican Bay Blvd.

Naples, FL 34108

**13. Signature**

Signature of officer filing this document

**DATE**

**14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607 0002, 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 a charged with an attachment with my address.**

**SIGNATURE**

Apr 28 1998

**FILED**

Apr 28 1998 8:00am

Secretary of State