

**2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000004720

**Entity Name:** HULT INTERNATIONAL BUSINESS SCHOOL, INC.**Current Principal Place of Business:**ONE EDUCATION STREET  
CAMBRIDGE, MA 02141**Current Mailing Address:**ONE EDUCATION STREET  
CAMBRIDGE, MA 02141 US**FEI Number:** 04-3348440**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US*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

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name HODGES, STEPHEN DR.  
Address ONE EDUCATION STREET  
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR  
Name AHLBERG, CHRISTOPHER DR.  
Address ONE EDUCATION STREET  
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR  
Name COLLINS, DAVID DR.  
Address ONE EDUCATION STREET  
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR  
Name BARBER, NICHOLAS  
Address ONE EDUCATION STREET  
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR  
Name SINTROS, JAMES  
Address ONE EDUCATION STREET  
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR  
Name BLENDOW, ASA  
Address ONE EDUCATION STREET  
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR  
Name SCHMID, BEATA  
Address ONE EDUCATION STREET  
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR  
Name JEDREY, CHRISTOPHER  
Address ONE EDUCATION STREET  
City-State-Zip: CAMBRIDGE MA 02141

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARTIN ASP**TREASURER****02/18/2019**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title               DIRECTOR  
Name               BURNS, CRAIG  
Address            ONE EDUCATION STREET  
City-State-Zip:   CAMBRIDGE MA 02141

Title               DIRECTOR  
Name               HULT, PHILIP  
Address            ONE EDUCATION STREET  
City-State-Zip:   CAMBRIDGE MA 02141

Title               TREASURER  
Name               ASP, MARTIN  
Address            ONE EDUCATION STREET  
City-State-Zip:   CAMBRIDGE MA 02141

Title               DIRECTOR  
Name               QUINTAVALLE, REBECCA  
Address            ONE EDUCATION STREET  
City-State-Zip:   CAMBRIDGE MA 02141