

2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000004720

Entity Name: HULT INTERNATIONAL BUSINESS SCHOOL, INC.**Current Principal Place of Business:**1 EDUCATION STREET
CAMBRIDGE, MA 02141**Current Mailing Address:**1 EDUCATION STREET
CAMBRIDGE, MA 02141**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 P, D
Name HODGES, STEPHEN
Address EIGHT EDUCATION ST.
City-State-Zip: CAMBRIDGE MA 02141

Title D
Name HULT, PHILIP
Address 1 EDUCATION STREET
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR
Name COLLINS, DAVID
Address 1 EDUCATION STREET
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR
Name PENASACK, TIM
Address 1 EDUCATION STREET
City-State-Zip: CAMBRIDGE MA 02141

Title S
Name LINK, GUNNAR
Address EIGHT EDUCATION ST.
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR
Name AHLBERG, CHRISTOPHER
Address 1 EDUCATION STREET
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR
Name BARBER, NICHOLAS
Address 1 EDUCATION STREET
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR
Name TO, WINNIE
Address 1 EDUCATION STREET
City-State-Zip: CAMBRIDGE MA 02141

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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: GUNNAR LINK**SECRETARY****04/26/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name SOUSA, LISA
Address 1 EDUCATION STREET
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR
Name SINTROS, JAMES
Address 1 EDUCATION STREET
City-State-Zip: CAMBRIDGE MA 02141