


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 24, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 442158**  
 1. Entity Name  
 THE ART INSTITUTE OF FORT LAUDERDALE, INC.



Principal Place of Business  
 1799 SE 17TH ST  
 FORT LAUDERDALE, FL 33316-0013 US

Mailing Address  
 C/O EDMC 210 SIXTH AVE  
 33RD FLOOR  
 PITTSBURGH, PA 15222 US

**DO NOT WRITE IN THIS SPACE**



04182008 No Chg-P CR2E034 (11/05)

4. FEI Number  
 59-1500255 Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
 THE PRENTICE-HALL CORPORATION SYSTEM  
 1201 HAYS ST  
 TALLAHASSEE, FL 32301

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	NAGELE, CHARLES
STREET ADDRESS	1799 SW 17TH ST
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316
TITLE	T
NAME	PANNOZZO, DORINDA
STREET ADDRESS	210 SIXTH AVE 33RD FLOOR
CITY-ST-ZIP	PITTSBURGH, PA 15222
TITLE	S
NAME	KRAMER, J. DEVITT
STREET ADDRESS	210 SIXTH AVE 33RD FL
CITY-ST-ZIP	PITTSBURGH, PA 15222
TITLE	D
NAME	CYPHER, ROBERT
STREET ADDRESS	210 SIXTH AVE 33RD FLOOR
CITY-ST-ZIP	PITTSBURGH, PA
TITLE	AS
NAME	MINAHAN, SUSAN
STREET ADDRESS	210 SIXTH AVE 33RD FLOOR
CITY-ST-ZIP	PITTSBURGH, PA 15222
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 05/13/08-80049-008 150.00

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 607, 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: *Sue Minahan* *Sue Minahan* 4/18/08 412-562-0900  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #