

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 704016

1. Entity Name

INTERNATIONAL COLLEGE FOUNDATION, INC.

FILED
Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90095 006 ****70.00

Principal Place of Business

1685 MEDICAL LANE
SUITE 200
FT. MYERS FL 33907-1157
US

Mailing Address

1685 MEDICAL LANE
SUITE 200
FT. MYERS FL 33907-1157
US

2. Principal Place of Business

Southwest Florida College

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Southwest Florida College

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-0972013

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JONES, DONALD C.
7855 126 AVE N
S-F
LARGO FL 34643

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE Donald C. Jones - Chief Executive Officer

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME JONES, DONALD C
STREET ADDRESS 7855 126TH AV. N
CITY-ST-ZIP LARGO FL

TITLE CVPD ☐ Delete
NAME DEVAUX, DOUGLAS
STREET ADDRESS 7855 126TH AVENUE NORTH
CITY-ST-ZIP LARGO FL

TITLE S ☐ Delete
NAME JONES, GREGORY H.
STREET ADDRESS 1685 MEDICAL LANE
CITY-ST-ZIP FT MYERS FL

TITLE D ☐ Delete
NAME JOHNSTON, DEAN
STREET ADDRESS 5266 HOLLISTER AVE, BLDG 11
CITY-ST-ZIP SANTA BARBARA CA

TITLE T ☐ Delete
NAME JONES, SHARON B.
STREET ADDRESS 1685 MEDICAL LANE
CITY-ST-ZIP FT MYERS FL

TITLE D ☐ Delete
NAME HUSTON, JOHN
STREET ADDRESS 1801 E. KIMBERLY RD
CITY-ST-ZIP DAVENPORT FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Change ☒ Addition
NAME Austin, Jeannie
STREET ADDRESS 4444 North Orange Blossom Trail
CITY-ST-ZIP Orlando, FL 32804

TITLE CVD ☒ Change ☐ Addition
NAME Devaux, Douglas
STREET ADDRESS 7855 126th Avenue North
CITY-ST-ZIP Largo, FL

TITLE SD ☒ Change ☐ Addition
NAME Jones, Gregory H.
STREET ADDRESS 1685 Medical Lane
CITY-ST-ZIP Ft. Myers, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☒ Change ☐ Addition
NAME Jones, Sharon B.
STREET ADDRESS 7855 126th Avenue North
CITY-ST-ZIP Largo, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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: Gregory H. Jones

1-10-00

941/939-4766

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)