2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2010
Secretary of State

DOCUMENT# 714765

Entity Name: PALM BEACH ATLANTIC UNIVERSITY, INC.

Current Principal Place of Business:

901 S. FLAGLER DR.
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 24708
WEST PALM BEACH, FL 334164708 US

New Mailing Address:

FEI Number: 59-1092732 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HARDIN, LU
901 S. FLAGLER DR.
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: HARDIN, LU
Address: 901 S. FLAGLER DR.
City-St-Zip: WEST PALM BEACH, FL 33401

Title: CFO
Name: MURRAY, RENAE A
Address: 901 S. FLAGLER DR.
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VC
Name: HAWKINS, SCOTT
Address: 901 S. FLAGLER DR
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: S
Name: OWENS, ROBERT T
Address: 901 S. FLAGER DR.
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: V
Name: FLEMING, WILLIAM M JR
Address: 901 S. FLAGLER DR
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: C
Name: SIMPSON, ROBERT
Address: 901 S. FLAGLER DR.
City-St-Zip: WEST PALM BEACH, FL 33401 US

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: RENAE MURRAY CFO 04/08/2010

Electronic Signature of Signing Officer or Director — Date