

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734103

FILED
Feb 10, 2004
Secretary of State**Entity Name:** INTERNATIONAL COLLEGE, INC.**Current Principal Place of Business:**2655 NORTHBROOKE DRIVE
NAPLES, FL 34119**New Principal Place of Business:****Current Mailing Address:**2655 NORTHBROOKE DRIVE
NAPLES, FL 34119**New Mailing Address:****FEI Number:** 59-6605703**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**MCMHAN, TERRY P
2655 NORTHBROOKS DR
NAPLES, FL 34119 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: T () Delete
Name: AGNELLI, JOHN J
Address: 2655 NORTH BROOKE DR
City-St-Zip: NAPLES, FL 34119

Title: PT () Delete
Name: MCMAHAN, TERRY P.,
Address: 2655 NORTHBROOKE DR.
City-St-Zip: NAPLES, FL 34119

Title: T () Delete
Name: WHITE, JOHN W
Address: 2655 NORTHBROOKE DR.
City-St-Zip: NAPLES, FL 34119

Title: S () Delete
Name: BROCK, JEANETTE
Address: 2655 NORTHBROOKE DR.
City-St-Zip: NAPLES, FL 34119

Title: T () Delete
Name: ARNOLD, KEITH
Address: 2655 NORTHBROOKE DRIVE
City-St-Zip: NAPLES, FL 34119

Title: T () Delete
Name: HUMPHREY, JACK R
Address: 3963 ENTERPRISE AVENUE
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOHN W. WHITE

T

02/10/2004

Electronic Signature of Signing Officer or Director

Date

DR. RICHARD WOODRUFF
2655 NORTHBROOKE DRIVE
NAPLES, FL 34119

MR. MICHAEL VOLPE
2655 NORTHBROOKE DRIVE
NAPLES, FL 34119

MR. WILLIAM VAN METER
2655 NORTHBROOKE DRIVE
NAPLES, FL 34119

MR. GERARD MCHALE
2655 NORTHBROOK DRIVE
NAPLES, FL 34119

MS. COLLEEN KVETKO, TRUSTEE
2655 NORTHBROOKE DRIVE
NAPLES, FL 34119

DR. JOSEPH DONAHUE, TRUSTEE
2655 NORTHBROOKE DRIVE
NAPLES, FL 34119

DR. LOU BENDER, TRUSTEE
2655 NORTHBROOKE DRIVE
NAPLES, FL 34119