

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747318

FILED
Apr 26, 2012
Secretary of State

Entity Name: COMMUNITY COLLEGES FOR INTERNATIONAL DEVELOPMENT INC.

Current Principal Place of Business:

6301 KIRKWOOD BLVD SW
RESOURCE CENTER SUITE 2400
CEDAR RAPIDS, IA 52406 US

New Principal Place of Business:

Current Mailing Address:

6301 KIRKWOOD BLVD SW
RESOURCE CENTER SUITE 2400
CEDAR RAPIDS, IA 52406 US

New Mailing Address:

FEI Number: 59-2073513

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAX BROWN, CAROL
C/O DON MATTHEWS
1200 W INTERNATIONAL SPEEDWAY BLVD
DAYTONA BEACH, FL 32120 US

Name and Address of New Registered Agent:

STAX BROWN, CAROL ED.D.
C/O DR. DONALD MATTHEWS
1200 W INTERNATIONAL SPEEDWAY BLVD
DAYTONA BEACH, FL 32120 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: ANDREA SIEBENMANN

04/26/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MD
Name: STAX BROWN, CAROL ED.D.
Address: 1200 W INTERNATIONAL SPEEDWAY BLVD
City-St-Zip: DAYTONA BEACH, FL 32120 US

Title: CD
Name: CARPENTER, RICHARD DR.
Address: 5000 RESEARCH FOREST DRIVE
City-St-Zip: THE WOODLANDS, TX 77381 US

Title: TSD
Name: STARCEVICH, MICK DR.
Address: 6301 KIRKWOOD BLVD SW
City-St-Zip: CEDAR RAPIDS, IA 52406 US

Title: DV
Name: JOHNSON, STEPHEN DR.
Address: 444 WEST THIRD STREET
City-St-Zip: DAYTON, OH 45402 US

Title: D
Name: BIRMINGHAM, JACK DR.
Address: 2400 SOUTH 240TH STREET, M/S 9-3
City-St-Zip: DES MOINES, WA 98198 US

Title: D
Name: PRINDIVILLE, BARBARA DR.
Address: 800 MAIN STREET
City-St-Zip: PEWAUKEE, WI 53072 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: CAROL STAX BROWN

DR.

04/26/2012

Electronic Signature of Signing Officer or Director

Date