2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005823

RONEY, PAUL

ANN ARBOR, MI 48106

24 FRANK LLOYD WRIGHT DRIVE

Name:

Address:

City-St-Zip:

FILED Jan 05, 2005 Secretary of State

Entity Na	me: AVE MAF	RIA COLLEGE, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1025 COM NAPLES, I	IMONS CIRCL FL 34119	E			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1025 COM NAPLES, I	IMONS CIRCL FL 34119	E			
FEI Number:	: 38-3415373	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of C	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
1395 PAN SUITE 300	.AWDOCK, IN THER LANE) FL 34109 US	C.			
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MONAGHAN, TI	YD WRIGHT DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () MULLER, RON 300 W. FORES YPSILANTI, MI	ST AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () LEFEVRE, GEF 300 W. FORES YPSILANTI, MI	ST AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	T ()) Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BRENAN PERGI CBO 01/05/2005