## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # F04000005160

1. Entity Name

AACSB INTERNATIONAL, INC. - THE ASSOCIATION TO ADVANCE COLLEGIATE SCHOOLS OF BUSINESS



FILED Feb 05, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

777 SOUTH HARBOR ISLAND BOULEVARD, #750 TAMPA, FL 33602

777 SOUTH HARBOR ISLAND BOULEVARD, #750 TAMPA, FL 33602



01242005 No Chg-NP

CR2E037 (10/03)

4. FEI Number 43-6036286 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name a	and	Address of	Current	Registered	Agent

FERNANDES, JOHN 777 SOUTH HARBOR ISLAND BOULEVARD, #750 TAMPA, FL 33602

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8. The above the obligat	named entity submits this statement for the plions of registered agent.	urpose of changing its registere	d office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept					
SIGNATURE Signature, typed or printed name of registered agent and life if applicable (NOTE. Registered Agent signature required when reinstalting)  DATE										
	Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Finan Trust Fund Contribution.	olngi	\$5.00 May Be Added to Fees						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO FERNANDES, JOHN 777 SOUTH HARBOR ISLAND BOULEVARD, #750 TAMPA, FL 33602			U00000216627 02/05/05-80056-006 61.25						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C WILLIAMS, DOYLE Z DEAN WALTON COLLEGE OF BUS/U OF AI FAYETTEVILLE, AR_727011201	R/BLDG 301	· · · · · · · · · · · · · · · · · · ·							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DANOS, PAUL DEAN DARTMOUTH COLLEGE, 100 TUCK I HANOVER, NH 037559040	DRIVE	DO NOT WRITE							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLAHERTY, RICHARD E DEAN 2200 BONFORTE BOULEVARD PUEBLO, CO 810014901									
TITLE NAME STREET ADDRESS CITY+ST-ZIP	D DIANGELO, JOSEPH A DEAN ST. JOSEPH'S U./5600 CITY AVENUE PHILADELPHIA, PA 191311395	Ē								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FULLER, REX D DEAN 2200 BONFORTE BOULEVARD PUEBLO, CO 810014901									
12. I hereby certify that the information supplied with this filling 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.										

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR