2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

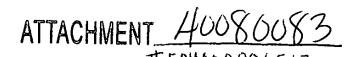
FILED May 03, 2005 8:00 am Secretary of State 05-03-2005 90115 018 ****61.25

DOCUMENT # F0400006517 1. Entity Name PRESIDENT AND DIRECTORS OF GEORGETOWN COLLEGE Attn: Jeffrey W. Comfort Principal Place of Business 2115 WISCONSIN AVENUE N.W. SHITE 500 2115 WISCONSIN AVENUE N.W. SHITE 500 2115 WISCONSIN AVENUE N.W. SHITE 500				A SHIFE SOO		g grade to be a		_	
2115 WISCONSIN AVENUE, N.W., SUITE 500 WASHINGTON, DC 20007 2115 WISCONSIN AVENUE WASHINGTON, DC 20007				r., Suite 500	4 IRBUSE NIA GRAN	HIN KOW AKW KOW			11 (18)
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02112005 CI	hg-NP	CR2E037 (10/	03)	
City & State		City & State			4. FEI Number 53 – 01966	03			ed For pplicable
Zip	Country	Zip	Cox	untry	5. Certificate of St		Fee Re	5 Addition	onal
6. Name and Address of Current Registered Agent				Nama	7. Name and Address of New Registered Agent				
BROGRAN	I. FRANCIS B JR			Name					
BROGRAN, FRANCIS B JR GREENBERG TAURIG, LLP 401 EAST LAS OLAS BLVD., SUITE 2000 FORT LAUDERDALE, FL 33301				Street Address (P.O. Box Number is Not Acceptable)					
, 0, 1, 1				City			FL Zip	Code	
	named entity submits this statement for ions of registered agent.	r the purpose of changing i	ts register	red office or regi	istered agent, or both, in	the State of Flo	rida. I am familiar	with, an	d accept
SIGNATURE .	Stgnalure, typed or printed name of registered agent	and tille if applicable. (NO	OTE: Registere	ed Agent signature rec	quired when reinstating)		DATE		
SIGNATURE .	Signature, typed or printed name of registered agent. Filling Fee is \$61.25 Due by May 1, 2005	9. Election C	ampaign I	Financing	quived when reinstating) \$5.00 May Be Added to Fees	l .	DATE ake check paya ida Department		e
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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 suppliemental report is true and accurate and I'll at my signature shall have the same legal effect as if made under outh; 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 a discussion of the corporation of the corporation or the receiver of trustee empowered to execute the corporation of the corporatio

SIGNATURE:

Edward M. Quinn ME OF SIGNING OFFICER OR DIRECTOR University Secretary



Georgetown cst. 1789



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 Directors
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Update 7/26/04

