

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000002151

FILED
Mar 29, 2011
Secretary of State

Entity Name: THE ASSOCIATION FOR THE ADVANCEMENT OF INTERNATIONAL EDUCATION, INC.

Current Principal Place of Business:

3970 RCA BLVD
SUITE 7000
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

3970 RCA BLVD
SUITE 7000
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 23-7168267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: D
Name: LEWIS, DR. JONATHAN
Address: 320 HOSPITAL DR., SUITE 40
City-St-Zip: WARRENTON, VA 20186

Title: D
Name: DELMAN, JACK
Address: RM #1-09221, 3508 N.W. 114TH AVE
City-St-Zip: DORAL, FL 33178

Title: D
Name: FLEETHAM, HAROLD
Address: PO BOX 71188
City-St-Zip: DUBAI, UNITED ARAB EMIRATES, XX XX

Title: D
Name: ANDERSON, FRANK
Address: 1866 SOUTHERN LANE
City-St-Zip: DECATUR, GA 300334097

Title: EXEC
Name: LAMB, ELSA C
Address: 3970 RCA BLVD, SUITE 7000
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: P
Name: PFANNL, DR. BETH
Address: 811 VIA CASSIA
City-St-Zip: ROME, ITALY, XX XX

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: ELSA C. LAMB

EXEC

03/29/2011

Electronic Signature of Signing Officer or Director

_____ Date