

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90113 022 ***150.00

DOCUMENT # G42199

1. Entity Name
UNIVERSITY STUDIES IN AMERICA, INC.



Principal Place of Business
**C/O WEIDENBACH & COMPANY, P.A.
1560 CAPITAL CIRCLE N.W. SUITE 16
TALLAHASSEE, FL 32303 US**

Mailing Address
**C/O WEIDENBACH & COMPANY, P.A.
1560 CAPITAL CIRCLE N.W. SUITE 16
TALLAHASSEE, FL 32303 US**

DO NOT WRITE IN THIS SPACE



02062008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2308490

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**WEIDENBACH, WILLIAM JR.
1560 CAPITAL CIR NW
STE 16
TALLAHASSEE, FL 32303**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
P
NAME
WEIDENBACH, WILLIAM JR.
STREET ADDRESS
1560 CAPITAL CIR NE, STE 16
CITY- ST- ZIP
TALLAHASSEE, FL

TITLE
VPSD
NAME
MARGOLIS, JACQUELINE
STREET ADDRESS
1560 CAPITAL CIRCLE NE, STE 16
CITY- ST- ZIP
TALLAHASSEE, FL 32303

TITLE
TD
NAME
MARGOLIS, GERARD
STREET ADDRESS
1560 CAPITAL CIR NW, STE 16
CITY- ST- ZIP
TALLAHASSEE, FL 32303

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, 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.

SIGNATURE:

JACQUELINE MARGOLIS GERARD MARGOLIS

Paul T. 2008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #