2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 28, 2006
Secretary of State

DOCUMENT# N00000003823

Entity Name: COMMUNITY COLLEGE BACCALAUREATE ASSOCIATION, INC.

Current Principal Place of Business:

EDISON COLLEGE
PO BOX 60210
FORT MYERS, FL 33919

New Principal Place of Business:

PO BOX 60210
FORT MYERS, FL 33919

Current Mailing Address:

EDISON COLLEGE
PO BOX 60210
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 65-1026796 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WALKER, KENNETH P DR.
EDISON COLLEGE
8099 CIKKEGE PKWY
FT. MYERS, FL 33919 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:	PD	( ) Delete
Name:	WALKER, KENNETH P DR.	
Address:	EDISON COMMUNITY COLLEGE,P.O. BOX 60210	
City-St-Zip:	FORT MYERS, FL 33919	
Title:	D	( ) Delete
Name:	RUSSELL, NEIL DR.	
Address:	900 MCGILL RD., UNV. COLLGE OF THE BAR	
City-St-Zip:	CANADA, BC V2E1M1	
Title:	SD	(X) Delete
Name:	GARMON, JOHN DR	
Address:	VISTA COLLEGE 2020 MILVIA STREET	
City-St-Zip:	BERKELEY, CA 94704	
Title:	SCC	( ) Delete
Name:	JOLLY, RICHARD DR	
Address:	MIDLAND COLLEGE 3600 N GARFIELD	
City-St-Zip:	MIDLAND, TX 79705	
Title:	T	( ) Delete
Name:	THOR, LINDA	
Address:	RIO SALADO COLLEGE, 2323 W 14TH ST	
City-St-Zip:	TEMPE, AZ 85281	
Title:	D	( ) Delete
Name:	REMINGTON, RONALD K DR.	
Address:	6375 W. CHARLESTON BLVD.	
City-St-Zip:	LAS VEGAS, NV 89146	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

SIGNATURE: KENNETH WALKER PRES 06/28/2006

Electronic Signature of Signing Officer or Director — Date