

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001754

FILED
Apr 28, 2006
Secretary of State

Entity Name: DEVRY STUDENT ACTIVITIES ORGANIZATION INC.

Current Principal Place of Business:

4000 MILLENIA BLVD
OFFICE OF STUDENT SERVICES
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

4000 MILLENIA BLVD
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 59-3701200

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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: DP () Delete
Name: PAGAN, PABLO
Address: 4000 MILLENIA BLVD
City-St-Zip: ORLANDO, FL 32839

Title: DV () Delete
Name: ABASS, JAMEER
Address: 4000 MILLENIA BLVD
City-St-Zip: ORLANDO, FL 32839

Title: DTS () Delete
Name: OROZCO, LORINDA
Address: 4000 MILLENIA BLVD
City-St-Zip: ORLANDO, FL 32839

Title: DS (X) Delete
Name: CASTRO, JESUS
Address: 4000 MILLENIA BLVD
City-St-Zip: ORLANDO, FL 32839

Title: DC (X) Delete
Name: MCKENZIE, DONOVAN
Address: 4000 MILLENIA BLVD
City-St-Zip: ORLANDO, FL 32839

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KUNSMAN, GARY
Address: 4000 MILLENIA BLVD
City-St-Zip: ORLANDO, FL 32839

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

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Name:
Address:
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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: GARY KUNSMAN

DP

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date