

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2005
Secretary of State

DOCUMENT# N04000001171

Entity Name: AMERICAN UNIVERSITY OF THE CARIBBEAN, INC.

Current Principal Place of Business:

PO BOX 926
OCALA, FL 34478

New Principal Place of Business:

Current Mailing Address:

PO BOX 926
OCALA, FL 34478

New Mailing Address:

PO BOX 15665
RUDENBERG/ MEB SH
WEST PALM BEACH, FL 334316

FEI Number: 85-0322460 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

FOSTER, JUDITH
255 NW 47 PL
OCALA, FL 34475 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 () Delete
Name: RUDENBERG, PAUL G
Address: PO BOX 15665 MEB SH
City-St-Zip: W PALM BCH, FL 33416

Title: D () Delete
Name: FOSTER, JUDITH
Address: 255 NW 47 PL
City-St-Zip: Ocala, FL 34475

Title: D () Delete
Name: PIERSON, DOUGLAS
Address: 85 KEVIN DR
City-St-Zip: NEW OXFORD, PA 17350

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: TOULOUTE, PAUL
Address: 5515 RIVER RUN TRAIL
City-St-Zip: FORT WAYNE, IN 46825

Title: D () Change (X) Addition
Name: JEUNE, MARIE LUCIE
Address: RTE NATIONALE #2
City-St-Zip: LES CAYES, HAITI, HT HT 8110

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAUL G. RUDENBERG

D

05/05/2005

Electronic Signature of Signing Officer or Director

_____ Date