

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001171

FILED
Jan 14, 2012
Secretary of State

Entity Name: AMERICAN UNIVERSITY OF THE CARIBBEAN, INC.

Current Principal Place of Business:

3240 SW 34TH ST
APT 812
OCALA, FL 34474

New Principal Place of Business:

3240 SW 34TH ST
APT 1012
OCALA, FL 34474

Current Mailing Address:

100 AIRPORT AVE
CAY-1680
VENICE, FL 34285

New Mailing Address:

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

Name and Address of Current Registered Agent:

VROOMAN, JOHN
100 AIRPORT AVE
CAY-1680
VENICE, FL 34285 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: AIRONE, ELKE
Address: 25890-64TH AVENUE
City-St-Zip: LANGLEY, BC V4W 1V3 CA

Title: D
Name: DUCLONA, PIERRE
Address: RT NATIONAL 2
City-St-Zip: LES CAYES, SU HT811 HT

Title: D
Name: DAVIS, JANICE
Address: 2 OLD STAGE ROAD
City-St-Zip: WEST HATFIELD, MA 01088 US

Title: D
Name: VROOMAN, JOHN
Address: 100 AIRPORT AVENUE
City-St-Zip: VENICE, FL 34285 US

Title: D
Name: ALBERTSON, DOUGLAS
Address: 280 NORTH STREET
City-St-Zip: BELCHERTOWN, MA 01007 US

Title: D
Name: DAVIS, PAUL
Address: 2 OLD STAGE ROAD
City-St-Zip: WEST HATFIELD, MA 01088 US

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: JOHN VROOMAN

D

01/14/2012

Electronic Signature of Signing Officer or Director

_____ Date