2008 NOT-FOR-PROFIT CORPORATION

FILED Apr 23, 2008 8:00 am Secretary of State 04-23-2008 90032 038 ****70.00

ANNUAL REPORT	
DOCUMENT # N07000009174	

	OF GRADUATE DEPARTN LOGY, INC.	MENTS OF	f			_			
Principal Place of Business 5665 PONCE DE LEON BLVD. FLIPSE BUILDING, RM 522 CORAL GABLES, FL 33146 Mailing Address 5665 PONCE DE LEON BLVD. FLIPSE BUILDING, RM 522 CORAL GABLES, FL 33146						1811 (8811 8811 8811 881			
2. Principal P	face of Business - No P.O. Box #	3. Mailing Address							MIN
Suite, Apt. #, etc. S		Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-NP	CR2E0	37 (12/06)	
City & State	Э	City & State	· · · · · · ·		4. FEI Numbe		26		pplied For lot Applicable
Zip	Country	Zip	Count	try		of Status Desired	Œ	\$8.75 Ac	
	6. Name and Address of Current F	egistered Agent			7. Name and	Address of New F	Registered	Agent	
MET LENG	, A.RODNEY		1	Name					
5665 PON FLIPSE BU	CE DE LEON BLVD. JILDING, RM 522			Street Address (P.O. Box Numbe	r is Not Acceptable	e)		
CORAL G	ABLES, FL 33146								
				City			Fl	Zip Co	de
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered	l office or register	red agent, or boti	n, in the State of Flo	orida. Iam	ı familiar with	i, and accept
SIGNATURE.	Signature, typed or printed name of registered agent a	nd title if applicable. (HOT)	E: Registered A	Agent signature require	d when reinstating)		DATE		
SIGNATURE.	Signature, typed or printed name of registered agent at Filling Fee is \$61.25 Due by May 1, 2008	9. Election Can Trust Fund C	npaign Fina	ancing	\$5.00 May Be Added to Fees	, (Make chec	k payable etment of !	
SIGNATURE	Filing Fee is \$61.25	9. Election Can Trust Fund C	npaign Fina	ancing	\$5.00 May Bo Added to Fees	, (take chec rida Depa	rtment of	State N 10
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I narrow verify may the information supplied with this filling goes 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 apcurate 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all differ like empowered.

A. Rod Ney Wellens Treasurer
presence of sounds officer on direction