

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003557

FILED
Apr 18, 2011
Secretary of State

Entity Name: INSTITUTE FOR THE ADVANCEMENT OF HEALTHCARE EDUCATION, INC.

Current Principal Place of Business:

100 E LINTON BLVD
308A
DELRAY BEACH, FL 33483

New Principal Place of Business:

1028 E HERITAGE CLUB CIRCLE
DELRAY BEACH, FL 33483

Current Mailing Address:

100 E LINTON BLVD
308A
DELRAY BEACH, FL 33483

New Mailing Address:

1028 E HERITAGE CLUB CIRCLE
DELRAY BEACH, FL 33483

FEI Number: 30-0549239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLIER, JEFFREY G
1028 E. HERITAGE CLUB CIRCLE
DELRAY BEACH, FL 33483 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: DIR
Name: HILLIER, JEFFREY G
Address: 1028 E HERITAGE CLUB CIRCLE
City-St-Zip: DELRAY BEACH, FL 33483

Title: DIR
Name: PRICE, DAVID
Address: 3845 COELEBS AVE.
City-St-Zip: BOYNTON BEACH, FL 33436

Title: DIR
Name: CARAS, BARBARA J
Address: 9006 WINDING WOODS DRIVE,
City-St-Zip: LAKE WORTH, FL 33467

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: JHILLIER

DIR

04/18/2011

Electronic Signature of Signing Officer or Director

Date