

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11602

FILED  
Feb 02, 2005  
Secretary of State

**Entity Name:** ALLIANCE FOR WORLD CLASS EDUCATION, INC.

**Current Principal Place of Business:**

4019 BOULEVARD CENTER DRIVE  
JACKSONVILLE, FL 32207 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5628  
JACKSONVILLE, FL 32247 US

**New Mailing Address:**

4019 BOULEVARD CENTER DRIVE  
THE SCHULTZ CENTER  
JACKSONVILLE, FL 32207 US

**FEI Number:** 59-2756660

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GRYMES, CHERYL  
4019 BOULEVARD CENTER DRIVE  
JACKSONVILLE, FL 32207 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: CD ( ) Delete  
Name: RUMMELL, PETER S  
Address: 245 RIVERSIDE AVENUE, SUITE 500  
City-St-Zip: JACKSONVILLE, FL 32202

Title: MD ( ) Delete  
Name: GRYMES, CHERYL  
Address: 4019 BOULEVARD CENTER DRIVE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: SDTD ( ) Delete  
Name: GREENE, A. HUGH  
Address: 800 PRUDENTIAL DR  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VD ( ) Delete  
Name: FIORENTINO, T. MARTIN  
Address: 50 N. LAURA STREET, SUITE 2750  
City-St-Zip: JACKSONVILLE, FL 32202

Title: VD ( ) Delete  
Name: HASKELL, PRESTON  
Address: 111 RIVERSIDE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32202

Title: VD ( ) Delete  
Name: NEWTON, RUSSELL JR  
Address: 200 WEST FORSYTH STREET  
City-St-Zip: JACKSONVILLE, FL 32202

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: RUMMELL, PETER S  
Address: 245 RIVERSIDE AVENUE, SUITE 500  
City-St-Zip: JACKSONVILLE, FL 32202

Title: CD (X) Change ( ) Addition  
Name: PAPPAS, M. LYNN  
Address: 245 RIVERSIDE AVENUE, SUITE 400  
City-St-Zip: JACKSONVILLE, FL 32202

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

Title: D (X) Change ( ) Addition  
Name: FIORENTINO, T. MARTIN  
Address: 50 N. LAURA STREET, SUITE 2750  
City-St-Zip: JACKSONVILLE, FL 32202

Title: D (X) Change ( ) Addition  
Name: HASKELL, PRESTON  
Address: 111 RIVERSIDE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32202

Title: D (X) Change ( ) Addition  
Name: NEWTON, RUSSELL JR  
Address: 200 WEST FORSYTH STREET  
City-St-Zip: JACKSONVILLE, FL 32202

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: LYNN PAPPAS

CD

02/02/2005

Electronic Signature of Signing Officer or Director

Date