

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003272

FILED  
Apr 05, 2006  
Secretary of State

**Entity Name:** UNIVERSITY CONSORTIUM OF THE AMERICAS, INC.

**Current Principal Place of Business:**

3128 LAMPLIGHTER  
SARASOTA, FL 34234

**New Principal Place of Business:**

244 SHOPPING AVE  
SUITE 364  
SARASOTA, FL 34237

**Current Mailing Address:**

C/O DR. BERNARD  
3128 LAMPLIGHTER  
SARASOTA, FL 34324 US

**New Mailing Address:**

C/O DR. BERNARD  
244 SHOPPING AVE #364  
SARASOTA, FL 34327 US

**FEI Number:** 65-0675395

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C/O DR. BERNARD  
3128 LAMPLIGHTER  
SARASOTA, FL 34324 US

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

C/O DR. BERNARD  
244 SHOPPING AVE  
SUITE 364  
SARASOTA, FL 34327 US

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: PROSPER BERNARD

04/05/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BERNARD, PROSPER M DR.  
Address: 3128 LAMPLIGHTER  
City-St-Zip: SARASOTA, FL

Title: SD ( ) Delete  
Name: PROSPER, BERNARD  
Address: 15 HYACINTH DR. APT 3B  
City-St-Zip: FORDS, NJ 08863

Title: D ( ) Delete  
Name: BERNARD, FRANCINE  
Address: 3128 LAMPLIGHTER  
City-St-Zip: SARASOTA, FL 34234

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: PROSPER BERNARD

PRES

04/05/2006

Electronic Signature of Signing Officer or Director

Date