2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003314

Apr 14, 2011 Secretary of State

Entity Name: MIAMI SHORES/BARRY UNIVERSITY "CONNECTED LEARNING COMMUNITY" (CLC), INC.

Current Principal Place of Business: New Principal Place of Business:

C/O COBB PARTNERS 355 ALHAMBRA CIRCLE

SUITE 1500

CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

C/O COBB PARTNERS 355 ALHAMBRA CIRCLE SUITE 1500 CORAL GABLES, FL 33134

3010 12 37 12 20 10 1

FEI Number: 65-0770873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PERDOMO, MERCEDES 355 ALHAMBRA CIRCLE SUITE 1500 CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DT

Name: WESTON, ANDREW

Address: 355 ALHAMBRA CIRCLE SUITE 1500

City-St-Zip: CORAL GABLES, FL 33134

Title: DS

Name: KELLEY, CHRISTOPHER
Address: 11098 BISCAYNE BLD. STE. 205

City-St-Zip: MIAMI, FL 33161

Title: D

Name: COBB, CHARLES

Address: 355 ALHAMBRA CIRCLE SUITE 1500

City-St-Zip: CORAL GABLES, FL 33134

Title: CD

Name: LIFTIN, ELAINE DR

Address: 3265 MERIDIAN PARKWAY, STE 130

City-St-Zip: WESTON, FL 33331

Title: PD

Name: PICHE, EVELYN PH.D

Address: 11300 NORTHEAST SECOND AVE. City-St-Zip: MIAMI SHORES, FL 33161

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: MERCEDES PERDOMO RA 04/14/2011