

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000001515

FILED
Mar 15, 2006
Secretary of State

Entity Name: COLLEGE INTERNSHIP PROGRAM, INC.

Current Principal Place of Business:

3716 N. WICKHAM ROAD
SUITE 1
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

3716 N. WICKHAM ROAD
SUITE 1
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 20-0657262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEALS, ROBERT L
730 STRAWBRIDGE AVENUE
SUITE 101
MELBOURNE, FL 32901 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MCMANMON, MICHAEL P DR
Address: 150 HIGHWAY A1A #307
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MCMANMON, MICHAEL P DR
Address: 121 MARTESIA WAY
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL P. MCMANMON

MGR

03/15/2006

Electronic Signature of Signing Officer or Director

Date