

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P23536 (6)

1. Corporation Name

NATIONAL EDUCATION TRAINING GROUP, INC.



Principal Place of Business

1751 W DIEHL RD
NAPERVILLE IL 60566
US

Mailing Address

18400 VON KARMAN AVENUE, 10TH FLOOR
IRVINE CA 92715

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

State, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified
03/22/1989

3a. Date of Last Report
02/07/1995

4. FEI Number
68-0179533

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.

SIGNATURE

(Signature of the person who has been appointed to be the registered agent)

(Print Name of Agent, if agent is a corporation or partnership)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
1. TITLE
NAME
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1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

P
SOTO, ROBERT J
1751 WEST DIEHL ROAD
NAPERVILLE IL
VPSD
MAYNARD, PHILIP C
18400 VON KARMAN AVE.
IRVINE CA
VPCF
BURKE, STEPHEN A.
1751 WEST DIEHL ROAD
NAPERVILLE IL
VPTD
OGATA, KEITH K.
18400 VON KARMAN AVE.
IRVINE CA
VPAT
GATTENIO, CHRISTINE A
18400 VON KARMAN AVE.
IRVINE CA
AT
DUNN, MICHAEL S
18400 VON KARMAN AVE.
IRVINE CA

☒ DELETE
☐ DELETE
☒ DELETE
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☒ DELETE
☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY, ST, ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY, ST, ZIP
13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY, ST, ZIP
17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY, ST, ZIP

P
MORAN, CHARLES E.
1751 WEST DIEHL ROAD
NAPERVILLE, IL 60566
VPCF
MCDONALD, THOMAS J.
1751 WEST DIEHL ROAD
NAPERVILLE, IL 60566
AT
JARDON, STEPHEN
18400 VON KARMAN AVENUE
IRVINE, CA 92715
AT
CLAUSEN, JOHN L.
18400 VON KARMAN AVENUE
IRVINE, CA 92715

☐ Change ☒ Addition
☐ Change ☐ Addition
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☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 in Block 12 or Block 13 as changed, or on an attachment with an address.

SIGNATURE:

John L. Clausen

John L. Clausen February 1, 1996 714-474-9400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

TELEPHONE NUMBER

CR2E034 (12/95)