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Apr 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **P29503** **(0)**

1. Corporation Name
SCHILLER INTERNATIONAL UNIVERSITY, INC.

Principal Place of Business	Mailing Address
CORPORATE TRUST CO. 1209 ORANGE ST. WILMINGTON DE 19801-1196	CORPORATE TRUST CO. 1209 ORANGE ST. WILMINGTON DE 19801-1196

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/24/1990

4. FEI Number: 22-2506969 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

LEIBRECHT, CHRISTOPH
453 EDGEWATER DR
DUNEDIN FL 34698

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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	11 TITLE	D	☒ Change ☐ Addition
NAME	LEIBRECHT, WALTER W.		12 NAME	LEIBRECHT, WALTER W.	
STREET ADDRESS	74379 INGERSHEIM		13 STREET ADDRESS	74379 Ingersheim	
CITY-ST-ZIP	GERMAN		14 CITY-ST-ZIP	Germany	
TITLE	D	☐ DELETE	21 TITLE	P	☐ Change ☒ Addition
NAME	FARRIS, ERDMUTHE TILLI		22 NAME	Thomas Leibrecht	
STREET ADDRESS	540 WEST 122ND ST		23 STREET ADDRESS	74379 Ingersheim	
CITY-ST-ZIP	NEW YORK NY		24 CITY-ST-ZIP	Germany	
TITLE	S	☐ DELETE	31 TITLE	D	☐ Change ☒ Addition
NAME	LEIBRECHT, HARALD		32 NAME	LEIBRECHT, CHRISTOPH	
STREET ADDRESS	74379 INGERSHEIM		33 STREET ADDRESS	453 Edgewater Drive	
CITY-ST-ZIP	GERMANY		34 CITY-ST-ZIP	Dunedin, FL 34698	
TITLE	D	☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME	OETTLER, WOLF-FRITZ		42 NAME		
STREET ADDRESS	APARTADO POSTAL 20-187		43 STREET ADDRESS		
CITY-ST-ZIP	MEXICO		44 CITY-ST-ZIP		
TITLE	D	☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME	JOHANSON, DR. SVEN		52 NAME		
STREET ADDRESS	15 COURT SQUARE		53 STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA		54 CITY-ST-ZIP		
TITLE	D	☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME	LEHMANN, PETER L		62 NAME		
STREET ADDRESS	2740 HAMPTON PKWY		63 STREET ADDRESS		
CITY-ST-ZIP	EVANSTON IL		64 CITY-ST-ZIP		

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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; 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Herald Leibrecht, Secretary 04/14/98 49-7142-95650 (German