

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000033562

1. Entity Name
AMERICAN UNIVERSITIES ADMISSION PROGRAM, INC.



Principal Place of Business
**4619 HIGEL AVE
SARASOTA, FL 34242 US**

Mailing Address
**5053 OCEAN BLVD
#19
SARASOTA, FL 34242 US**



03262004 No Chg-P CR2EQ34 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0579689

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**YADLEY, GREGORY C
101 E. KENNEDY BOULEVARD
SUITE 2500
TAMPA, FL 33602**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

U000000105081
04/07/04-80011-005 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CDP PRADE, JEAN-NOEL 4619 HIGEL AVENUE SARASOTA, FL 34242
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S PRADE, ELIZABETH 4619 HIGEL AVE SARASOTA, FL 34242
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**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **JEAN-NOEL PRADE** **March 26, 2003 941346147**

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone