above, or on an attachment with all other like empowered.		
SIGNATURE: RICKY MADISON	PRESIDENT	05/01/2022

Address 618 E SOUTH ST STE 500 618 E SOUTH ST STE 500 City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

SIGNATURE: RICKY MADISON

				00			
	Electronic Signature of Registered Agent						
Officer/Director Detail :							
Title	Ρ	Title	VP				
Name	MADISON, RICKY	Name	LIM, FRANCIS				
Address	618 E SOUTH ST STE 500	Address	618 E SOUTH ST STE 500				
City-State-Zip:	ORLANDO FL 32801	City-State-Zip:	ORLANDO FL 32801				
Title	т	Title	0				
Name	RAGIMOV, EMIL	Name	FLEURY, NILSA				
Address	618 E SOUTH ST STE 500	Address	618 E SOUTH ST STE 500				
City-State-Zip:	ORLANDO FL 32801	City-State-Zip:	ORLANDO FL 32801				
Title	0	Title	М				
Name	WHITAKER, DAISY	Name	GHULAMALI, IMRAN				
Address	618 E SOUTH ST STE 500	Address	618 E SOUTH ST STE 500				

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.

618 E SOUTH ST STE 500 ORLANDO, FL 32801 US

Name and Address of Current Registered Agent:

FEI Number: 86-3338395

MADISON, RICKY

618 E SOUTH ST STE 500 ORLANDO, FL 32801 US

Current Principal Place of Business: 618 E SOUTH ST STE 500 ORLANDO, FL 32801

Current Mailing Address:

DOCUMENT# N2100005330

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE CONTINENTS STATES UNIVERSITY INC

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

Electronic Signature of Signing Officer/Director Detail

FILED May 01, 2022 Secretary of State 7072550129CC

05/01/2022 Date

Certificate of Status Desired: No

Date