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
above, or on an attachment with all other like empowered.

PRESIDENT

Entity Name: FLORIDA COUNCIL OF PRIVATE COLLEGES, INC.

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

41 N. 20TH STREET, A17 HAINES CITY, FL 33844-4638

Current Mailing Address:

41 N. 20TH STREET, A17 HAINES CITY, FL 33844-4638 US

FEI Number: 90-0927430

Name and Address of Current Registered Agent:

LEE, EARLE E DR 41 N. 20TH STREET, A17 HAINES CITY, FL 33844-4638 US

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: DR. EARLE E. LEE				
	Electronic Signature of Registered Agent		Date	
Officer/Director Detail :				
Title	Ρ	Title	D	
Name	LEE, EARLE E DR	Name	BROWN, SANTARVIS DR	
Address	41 N 20TH STREET,	Address	17531 NORTHWEST 47TH AVENUE	
City-State-Zip:	A17 HAINES CITY FL 33844-4638	City-State-Zip:	MIAMI GARDENS FL 33055	
Title Name Address City-State-Zip:	D LAFFITTE, JOHN DR 9353 SW 152 AVE. MIAMI FL 33196	Title Name Address City-State-Zip:	ESQ. NELSON, FREDERICK H 11911 EGRET BLUFF CLERMONT FL 34711	
Title Name Address City-State-Zip:	D HUMPHREYS, DANIEL 25400 US HWY 19 NORTH, SUITE 150 CLEARWATER FL 33763			

SIGNATURE: EARLE E. LEE

Electronic Signature of Signing Officer/Director Detail

FILED Apr 26, 2019 Secretary of State 8307991956CC

Certificate of Status Desired: No

04/26/2019 Date