

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065398

Entity Name: FLORIDA CAREER COLLEGE, INC.**Current Principal Place of Business:**1000 CORPORATE DR
SUITE 500
FT. LAUDERDALE, FL 33334**Current Mailing Address:**1000 CORPORATE DR
SUITE 500
FT. LAUDERDALE, FL 33334 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**KNOBEL, DAVID
1000 CORPORATE DR
SUITE 500
FT. LAUDERDALE, FL 33334 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title CEO
Name DAVID, KNOBEL
Address 3383 NORTH STATE ROAD 7
City-State-Zip: LAUDERDALE LAKES FL 33319Title COO
Name YAWN, NEAL
Address 3383 NORTH STATE ROAD 7
City-State-Zip: LAUDERDALE LAKES FL 33319Title D
Name NIEHAUS, ROBERT
Address 3383 NORTH STATE ROAD 7
City-State-Zip: LAUDERDALE LAKES FL 33319Title CFO
Name PIERNE, JEFFREY
Address 3383 NORTH STATE ROAD 7
City-State-Zip: LAUDERDALE LAKES FL 33319Title CCO
Name BARTNESS, DEAN
Address 3383 NORTH STATE ROAD 7
City-State-Zip: LAUDERDALE LAKES FL 33319Title D
Name ABRAMS, DAVID
Address 3383 NORTH STATE ROAD 7
City-State-Zip: LAUDERDALE LAKES FL 33319

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY PIERNE**CFO****02/20/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date