. FILF NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # F9600000247 (4)

ADVANCE CAREER COLLEGES, INC.

Principal Prace of Business Mailing Address PO BOX 1367 MCCOMB MS 39648 MCCOMB MS 39648-1367								
MOCOMB MS	33040	MCCCMB M3 33040-1307			Date incorporated or Qualified 01/16/1996	3a. Date of I	.ast Report	
2. Prince at P	lace of Business	2a. Mailing Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		4. FEI Number	<u> </u>	Applied For	
21		26			34-1685946		Not Applicable	
Suite Apt		Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 Additional ee Required	
City & Stat	е	City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees	
Ζιρ 24	Country 25	Z(p)	Country 30	,	This corporation has liability for Florida Statutes	intangible tax ur ☐ Yes ☐ No	ider s. 199.032,	
<u> </u>	Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent		
	CORPORATION SYSTEM		61	Name				
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			82	Street Ac	Address (P.O. Box Number is Not Acceptable)			
			83					
			84	City		FL 85	Zip Code	
agent Fa	in familiar with, and accept the obliga கேர் காட்டியாளர்க்கோ விளிந்துள்ளிற்றி	ions of, Section 607.0505, Ff	orida Statute E: Registered Ag	S.	ration's board of directors. I hereby acce	DATE		
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFI	CI CI		
NAVE	SMITH, STEWART A	LJ OLLET	1.2 NAME			EJ 9	iange [] Addition	
STREET ADDRESS	740 S FEDERAL HWY., APT. 41	0		ADDRESS				
COTY - \$1 - 21P	POMPANO BEACH FL 33062	•	1.4 CITY-5					
Tills	V	DELETE	2 1 TITLE	,	Vice-President	Z CI	hange Addition	
NANti	DICKEY, PATSY C 22		2.2 NAME		Smith, Stewart A. Jr.			
STREET ADDITION	802 24TH ST., APT. 2		23 STREET		5110 W University Blvd	1		
CIY S1-2IF	MCCOMB MS 39648		2. 4 CITY-		Jacksonville. FL			
7:105	ST	☐ DELETE	3 1 TITLE		•		hange LAddition	
NAME:	SMITH, AILEEN B	10	3.2 NAME					
STREET ADDRESSS	740 S FEDERAL HWY., APT. 41 POMPANO BEACH FL 33062	Ū		ADDRESS				
CHY SI ZII'	PUMPANO BEACH PL 33002	☐ DELETE	3.4. CITY - 4.1 TITLE	ST-ZIP		C	hange Addition	
TIFLE	, .	OLLUL	4.1 IIILE 4. 2 NAME			Ed VI	range Adamon	
NAME STREET ADOLL SG				ADDRESS				
CHY SI ZIF			4.4 CITY-1					
TILLS		DELETE	5.1 TITLE			□ ci	hange Addition	
NAME.			5.2 NAME					
STREET ADDRESS				ADDRESS				
Off v - \$1 - 2161			5.4 CITY-5	ST-ZIP				
TIFLE		☐ DELETE	6.1 T(TLE			C	hange Addition	
NAME			6.2 NAME					
SPREET ADDRESS			6.3 STREET	ADDRESS				
C117 - S1 - 21P			6 4 City-9	37 7IP				

14. I do 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