FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F96000004221 (5)

RHODES COLLEGES, INC.

Principal Place of Business

2. Principal Place of Business

6 HUTTON CTR DRIVE. SUITE 400 SANTA ANA CA 92707-5764

Mailing Address

2a. Mailing Address

6 HUTTON CTR DRIVE. SUITE 400 SANTA ANA CA 92707-5764

FILED Jan 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/19/1996

4. FEI Number

2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For		
21		26		33-0717311	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
22		27		5. Certificate of Status Desired	Fee Required		
City & State	e	City & State		,	6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	☐ Added to Fees		
Zip	Country	Zip	Country		8. This corporation owes or has pai	id the current year Intangible	
24 25 29 30			0	Personal Property Tax due June 30. Yes No			
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
NATIONSCORP REGISTERED AGENTS, INC.			81 Nar	ne	-		
526 E. PARK AVE.			82 Stra	82 Street Address (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32361			02 04	on other Address (1.0. box Hamber is Not Acceptable)			
			83	83			
			24 01				
			84 City	'		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature 7/							
12.	OFFICERS AND DIRECTORS 13.					TORS IN 12	
TITLE	PD	☐ DELETE	1,1 TITLE		ICE PRESIDENT	nge 📝 Addition	
NAME	MOORE, DAVID G		1,2 NAME	H	IOLLAND, LLOYD W.	_	
STREET ADDRESS	6 HUTTON CTR DRIVE, SUITE	400	1.3 STREET ADDRE	g 2	5661 HAZELNUT LANE	· · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP	SANTA ANA CA 92707-5764		1.4 CITY - ST - ZIP	~ L	AKE FOREST, CALIF. 9263	0	
TITLE	VSD	DELETE	2.1 TITLE			ப viange	
NAME	ST PIERRE, PAUL		2.2 NAME				
STREET ADDRESS	6 HUTTON CTR DRIVE, SUITE	400	2.3 STREET ADDRES				
	SANTA ANA CA 92707-5764		2.4 CITY - ST - ZIP	~			
CITY - ST - ZIP		☐ DELETE	3.1 TITLE			Change Addition	
NAME	MCCORD, FRANK J		3.2 NAME				
	6 HUTTON CTR DRIVE, SUITE	400		.			
STREET ADDRESS	SANTA ANA CA 92707-5764		3,3 STREET ADDRE	»>			
CITY-ST-ZIP	D	DELETE	3.4. CITY-ST-ZIP			Change Addition	
TITLE	WILSON, LOYAL W	CT Dereie	4.1 TITLE			LI Grange LI Addition	
NAME	6 HUTTON CTR DRIVE, SUITE	400	4. 2 NAME	.			
STREET ADDRESS	SANTA ANA CA 92707-5764	100	4.3 STREET ADDRES	is			
CITY-ST-ZIP	D		4,4 CITY-ST-ZIP			Change Addition	
TITLE	_	DELETE	5.1 TITLE			Change Addition	
NAME	MCGINTY, KEVIN J	100	5.2 NAME				
STREET ADDRESS	6 HUTTON CTR DRIVE, SUITE	ŧw	5.3 STREET ADDRES	is			
CITY-ST-ZIP	SANTA ANA CA 92707-5764		5.4 CITY-ST-ZIP				
TITLE	VS	☐ DELETE	6.1 TITLE			Change Addition	
NAME	DEVEREUX, DENNIS L	***	6.2 NAME				
STREET ADDRESS	6 HUTTON CTR DRIVE, SUITE	100	6.3 STREET ADDRES	is			
CITY-ST-ZIP	SANTA ANA CA 92707-5764		6.4 CITY-ST-ZIP				
14. 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							

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 12 or Block 13 if chapter 6, or on an attachment with an address.

MARIO E/FRANKITEMS GAS

115/98