2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 22, 2006 8:00 am Secretary of State 08-22-2006 90029 006 ***550.00

DOCUMENT #F96000004227 1. Entity Name RHODES COLLEGES, INC.											
6 HUTTON CTR DRIVE, SUITE 400		Mailing Address 6 HUTTON CTR DRIVE, SUITE 400 SANTA ANA, CA 92707-5764					5(025	945		
Principal Place of Business 3. Mailing Address			3								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			07062006	Chg-P	CR2E0	34 (11/05)		
City & State	е	City & State	City & State			4. FEI Numb				oplied For	
Z ip	Country	Country Zip Cou		у			of Status Desired		\$8.75 Ad	ditional	
Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name						
CT CORPORATION SYSTEM					Name						
C/O CT CC	ORPORATION SYSTEM TH PINE ISLAND ROAD		Street Address			(P.O. Box Number is Not Acceptable)					
PLANTATION, FL 33324											
				City				FL	Zip Cod	8	
8. 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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE											
FILE NOWIIT FEE IS \$550.00 Due by September 6, 2006 9. Election Campaign Financing Trust Fund Contribution.						00 May Be ad to Fees					
10.	OFFICERS AND D	IRECTORS	11.			ADDITIONS	L /CHANGES TO OFF	FICERS AND	DIRECTOR	S IN 11	
TITLE	C	☐ Delete	TITLE		EVP/CFO Crd, Kenneth S.			☐ Change	Addition		
NAME STREET ADDRESS CITY+ST+ZIP	8 HUTTON CTR DRIVE, SUITE 400 s			T ADDRESS	6 Hut		Prive, Suite 400 2707				
TITLE	PCOO Del		TITLE	-					☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	MIURA, NOLAN A 6 HUTTON CTR DRIVE, SUITE 40 SANTA ANA, CA 92707	0	STREET CITY-S	T ADDRESS ST-ZIP							
TITLE	VPS □ Deiele □				•	•			☐ Change	Addition	
NAME STREET ADDRESS	MORTENSEN, STAN 6 HUTTON CTR DRIVE, SUITE 40	n	NAME	T ADDRESS							
CITY-ST-ZTP	SANTA ANA, CA 927075764		CITY-S								
TITLE	DCEO MASSIMINO, JACK D	☐ Delete	TITLE						Change	Addition	
STREET ADDRESS	6 HUTTON CTR DRIVE, SUITE 40	0	STREET	ADDRESS							
CITY-ST-ZIP	SANTA ANA, CA 92707		CITY-S	ST-ZIP							
TITLE			TITLE NAME						☐ Change	☐ Addition	
STREET ADDRESS	6 HUTTON CTR DRIVE, SUITE 40	0		F ADDRESS .						į	
CITY-ST-ZIP	SANTA ANA, CA 92707 VD	☐ Delete	CITY-S	51-21					☐ Change	☐ Addition	
NAME	WILSON, BETH	□ voca	NAME						C. C. ALIGO		
STREET ADORESS CITY-SY-ZIP	6 HUTTON CENTER DR #400 SANTA ANA, CA 92707		STREET CITY-S	T ADDRESS ST-ZIP							
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental 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 appears in Block 10 or Block 11 if changed, or on an attachment with an adoptase, with all other like empowered. RHODES COLLEGES, INC. Stan A. Mortensen, Sylp Gent Coursel & Logo. Sec.											
SIGNATURE:											
	MICHATURE AND TVOED DO DOIS	NTED NAME OF SIGNING OFFICER O	P OIDECTO	\u0			Date		utime Otrone #		