2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004222

Entity Name: CORINTHIAN COLLEGES, INC.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6 HUTTON CTR DRIVE, SUITE 400 SANTA ANA, CA 927075764 **Current Mailing Address: New Mailing Address:** 6 HUTTON CTR DRIVE, SUITE 400 SANTA ANA, CA 927075764 FEI Number: 33-0717312 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete (X) Change () Addition MOORE, DAVID G HARTSHORN, TERRY Name: Name: 6 HUTTON CTR DRIVE, SUITE 400 6 HUTTON CTR DRIVE, SUITE 400 Address: Address: City-St-Zip: SANTA ANA, CA 927075764 City-St-Zip: SANTA ANA, CA 927075764 Title: Title: () Delete () Change () Addition MASSIMINO, JACK D Name: Name: 6 HUTTON CTR DRIVE, SUITE 400 Address: Address: SANTA ANA, CA 927075764 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition PIERRE, PAUL R ST. Name: Name: 6 HUTTON CTR DRIVE, SUITE 400 Address: Address: SANTA ANA, CA 92707 City-St-Zip: City-St-Zip: Title: () Delete Title: PCOO (X) Change () Addition WALLER, PETER BARRY, MARY Name: Name: Address: 6 HUTTON CTR DRIVE, SUITE 400 Address: 6 HUTTON CTR DRIVE, SUITE 400 City-St-Zip: SANTA ANA, CA 927075764 City-St-Zip: SANTA ANA, CA 927075764 Title: CFO () Delete Title: () Change () Addition ORD, KENNETH S Name: Name: 6 HUTTON CENTER DR. #400 Address: Address: City-St-Zip: SANTA ANA, CA 92707 City-St-Zip: Title: () Delete Title: () Change () Addition MORTENSEN, STAN A Name: Name: 6 HUTTON CENTER DR., #400 Address: Address: City-St-Zip: City-St-Zip: SANTA ANA, CA 92707

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: STAN A MORTENSEN VS 05/01/2007