

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005689

FILED
Apr 30, 2010
Secretary of State

Entity Name: FLORIDA COUNCIL OF PRIVATE COLLEGES, INC.

Current Principal Place of Business:

1900 KATHRYN SPEED COURT
TALLAHASSEE, FL 323032712 US

New Principal Place of Business:

2540 FL GA HIGHWAY
HAVANA, FL 32333 US

Current Mailing Address:

1900 KATHRYN SPEED COURT
TALLAHASSEE, FL 323032712 US

New Mailing Address:

2540 FL GA HIGHWAY
HAVANA, FL 32333 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, EARLE E DR
41 N 20TH STREET, # 17
HAINES CITY, FL 338444638 US

Name and Address of New Registered Agent:

JOHNSON, ABE DR
4085 BOTHWELL TERRACE
TALLAHASSEE, FL 32317 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: DR. ABE JOHNSON

04/30/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: LEE, EARLE E DR
Address: 41 N 20TH STREET, # 17
City-St-Zip: HAINES CITY, FL 338444638

Title: VP
Name: JOHNSON, ABE DR
Address: 4085 BOTHWELL TERRACE
City-St-Zip: TALLAHASSEE, FL 323178548

Title: D
Name: FREEBERG, C. WAYNE DR
Address: 808 ESQUIRE LANE
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: ESQ.
Name: NELSON, FREDERICK H
Address: 11911 EGRET BLUFF
City-St-Zip: CLERMONT, FL 34711

Title: D
Name: FREY, DENNIS D DR.
Address: 520 KIMBER LANE
City-St-Zip: EVANSVILLE, IN 47715-282

Title: D
Name: PORTIGLIATTI, ANTHONY DR
Address: 5950 LAKEHURST DR., SUITE 101
City-St-Zip: ORLANDO, FL 32819

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

SIGNATURE: DR. ABE JOHNSON

VP

04/30/2010

Electronic Signature of Signing Officer or Director

Date