

FILE NOW: FILING FEE IS \$61.25

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Jun 22 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N97000005795			
1. Corporation Name AMERITECH INSTITUTE FOR CAREER EDUCATION, INC. Nova Career Institute, Inc. N/C 5/28/98			
Principal Place of Business 3555 South Ocean Blvd, #415 South Palm Beach, FL 33480		Mailing Address	
2. Principal Place of Business 4300 10th Avenue North Suite, Apt. #, etc.		2a. Mailing Address P.O. Box 5658 Suite, Apt. #, etc.	
23 Lake Worth, FL City & State		26 Lake Worth, FL City & State	
24 33461 Zip		29 33466 Zip	
25 US Country		30 US Country	
9. Name and Address of Current Registered Agent Sue E. Jones 3555 South Ocean Boulevard, #415 South Palm Beach, FL 33480		10. Name and Address of New Registered Agent Jack D. Jones 4300 10th Avenue North Suite 3 Lake Worth, FL 33461	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE: <i>Jack D. Jones</i> Pres - Reg agent 6/11/98 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D <input type="checkbox"/> DELETE NAME: Jones, Sue E STREET ADDRESS: 3555 South Ocean Blvd, #415 CITY-ST-ZIP: South Palm Beach, FL 33480		1.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME: 6176 Grand Cypress Circle 1.3 STREET ADDRESS: Lake Worth, FL 33463 1.4 CITY-ST-ZIP: Lake Worth, FL 33463	
TITLE: D <input type="checkbox"/> DELETE NAME: Jones, Jack D. STREET ADDRESS: 3555 South Ocean Blvd, #415 CITY-ST-ZIP: South Palm Beach, FL 33480		2.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME: 6176 Grand Cypress Circle 2.3 STREET ADDRESS: Lake Worth, FL 33463 2.4 CITY-ST-ZIP: Lake Worth, FL 33463	
TITLE: D <input type="checkbox"/> DELETE NAME: Provenzale, Philip DR STREET ADDRESS: 1381 East Main Street CITY-ST-ZIP: Pahokee, FL 33467		3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME: 100002568971 3.3 STREET ADDRESS: -06/23/98-01026-009 3.4 CITY-ST-ZIP: ***7D.00	
TITLE: D <input type="checkbox"/> DELETE NAME: Provenzale, Christine STREET ADDRESS: 1381 East Main Street CITY-ST-ZIP: Pahokee, FL 33467		4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME: 706/22 4.3 STREET ADDRESS: 706/22 4.4 CITY-ST-ZIP: 706/22	
TITLE: D <input type="checkbox"/> DELETE NAME: Regan, Louise STREET ADDRESS: 55 Maple Street CITY-ST-ZIP: Bangor, ME 04401		5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME: 100002568971 5.3 STREET ADDRESS: -06/23/98-01026-009 5.4 CITY-ST-ZIP: ***7D.00	
TITLE: <input type="checkbox"/> DELETE NAME: Regan, Louise STREET ADDRESS: 55 Maple Street CITY-ST-ZIP: Bangor, ME 04401		6.1 TITLE: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6.2 NAME: Breznen-Alexandro, Barbara 6.3 STREET ADDRESS: 7059 Davit Circle 6.4 CITY-ST-ZIP: Lake Worth, FL 33467	
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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: <i>Jack D. Jones</i> President 6/11/98 (561) 960-1007			

CR2E037 (10/97)