

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

* CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 13 PM 12:05

DOCUMENT # 702559 (6)
1. Corporation Name
ROYCE NURSING FOUNDATION, INC.

Principal Place of Business Mailing Address
1755 N.W. 12 AVE. 1755 N.W. 12 AVE
ROYCE BUILDING ROYCE BUILDING
MIAMI FL 33136 MIAMI FL 33136

DO NOT WRITE IN THIS SPACE

3. Date incorporated or created 06/14/1961 3a. Date of Last Report 01/28/1994
4. FEI Number 51-0169662 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 1611 NW 12th Ave. 26 1611 NW 12th Ave.
22 % JMH - School of Nsg. 27 % JMH - School of Nsg.
23 Miami FL 28 Miami FL
24 33134 25 U.S.A. 29 33134 30 U.S.A.

9. Name and Address of Current Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
MASS, D. JANE
420 HARDEE ROAD
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

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 N/A DATE 2/6/95

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY- ST- ZIP
ST KRUEGER, JUDY 12340 SW 99TH AVE MIAMI FL
P MASS, JANE D 420 HARDEE ROAD CORAL GABLES, FL 00000
VP ROBERTS, NANCY 15060 EGAN LANE HIALEAH FL
D BURGESS, BERNARD 112 VALENCIA AVE. CORAL GABLES, FL 00000
D MACKINNON, HAROLD A 122 D-1 LAKE PINE CR. LAKE WORTH FL
D JAFFE, JEAN 5411 SW 87 AVE MIAMI, FL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law from 1992(3)(6), 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 or on an attachment with an affidavit.

SIGNATURE: [Signature] DATE: 2/6/95 (305) 585-7134
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR