

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

APPROVED
AND
FILED

98 MAY -4 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 725121 (8)

1. Corporation Name

THE VILLAGE SOUTH, INC.



Principal Place of Business

Mailing Address

3180 BISCAYNE BLVD.
MIAMI FL 33137

3180 BISCAYNE BLVD.
MIAMI FL 33137

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

6. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/28/1972

4. FEI Number

59-1452736

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DV
LIEBERMAN, HENRY
STREET ADDRESS 20220 HIGHLANDS LAKES BLVD.
CITY-ST-ZIP NO. MIAMI BEACH FL

TITLE ☒ DELETE

NAME ~~STB~~
ROEDEL, JERRY
STREET ADDRESS 4975 NORTHWEST 82ND AVENUE
CITY-ST-ZIP LAUDERHILL FL

TITLE ☒ DELETE

NAME ~~EVF~~
JACKSON, VALERA
STREET ADDRESS 3180 BISCAYNE BOULEVARD
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME ED
GISSEN, MATTHEW
STREET ADDRESS 3180 BISCAYNE BOULEVARD
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME D
HOLDER, JAY
STREET ADDRESS 5090 BIRD ROAD
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME PD
TREADWAY, DEEANN
STREET ADDRESS 1717 NORTH BAYSHORE DR. SUITE 3256
CITY-ST-ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

000002516190--2
-05/07/98--01122--015

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

*****70.00 *****70.00

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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:

Matthew Gissen

MATTHEW GISSSEN 4/30/98 3055733284

CR2E037 (10/97)