

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N36293** (1)

1. Corporation Name  
**FLORIDA KEYS AREA HEALTH EDUCATION CENTER PROGRA M, INC.**



Principal Place of Business: **8901 OVERSEAS HWY MARATHON FL 33050 US**  
Mailing Address: **8901 OVERSEAS HWY MARATHON FL 33050 US**

3. Date incorporated or Qualified: **01/25/1990**  
3a. Date of Last Report: **03/09/1995**

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields.

4. FEI Number: **65-0183810**  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent: **MELLON-LACEY, DIANA 8901 OVERSEAS HWY MARATHON FL 33050**  
10. Name and Address of New Registered Agent (81-84): **Mary Joubert 8901 Overseas Highway Marathon, FL 33050**

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: *Mary Joubert* (NOTE: Registered Agent signature required when reinstating) DATE: **4/16/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	ROGERS, CAROL	1.1 TITLE	
NAME:	5900 JUNIOR COLLEGE RD.	1.2 NAME	
STREET ADDRESS:	KEY WEST FL 33040	1.3 STREET ADDRESS	
CITY-ST-ZIP:		1.4 CITY-ST-ZIP	
TITLE: CD	DOOLEY, COLEEN	2.1 TITLE	
NAME:	5901 W. COLLEGE RD.	2.2 NAME	
STREET ADDRESS:	KEY WEST FL 33040	2.3 STREET ADDRESS	
CITY-ST-ZIP:		2.4 CITY-ST-ZIP	
TITLE: SD	TRIBBLE, RICK	3.1 TITLE	
NAME:	MONROE CO. DETENTION CTR - 5501 COLLEGE RD	3.2 NAME	
STREET ADDRESS:	KEY WEST FL 33040	3.3 STREET ADDRESS	
CITY-ST-ZIP:		3.4 CITY-ST-ZIP	
TITLE: TD	DANSBY, BRADLEY JR.	4.1 TITLE	Patrice Tavernier
NAME:	70 SAWYER DR.	4.2 NAME	3301 Overseas Hwy
STREET ADDRESS:	SUMMERLAND KEY FL 33042	4.3 STREET ADDRESS	Marathon, FL 33050
CITY-ST-ZIP:		4.4 CITY-ST-ZIP	
TITLE: ED	MELLON-LACEY, DIANA	5.1 TITLE	Mary Joubert
NAME:	8901 OVERSEAS HWY	5.2 NAME	8901 Overseas Hwy
STREET ADDRESS:	MARATHON FL 33050	5.3 STREET ADDRESS	Marathon, FL 33050
CITY-ST-ZIP:		5.4 CITY-ST-ZIP	
TITLE:		6.1 TITLE	
NAME:		6.2 NAME	
STREET ADDRESS:		6.3 STREET ADDRESS	
CITY-ST-ZIP:		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 Section 119.07(3)(k), 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: *Mary Joubert Executive Director* DATE: **4/16/96** (305) 743-7111

CR2E037 (12/95)