

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

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**

3. Date Incorporated or Qualified **12/28/1972** 3a. Date of Last Report **12/28/1995**

21	2. Principal Place of Business	2a. Mailing Address	26	4. FEI Number	Applied For
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.	27	59-1452736	Not Applicable
23	City & State	City & State	28	5. Certificate of Status Desired	<input checked="" type="checkbox"/> XXX \$8.75 Additional Fee Required
24	Zip	Country	29	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
25	Zip	Country	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent
**GISSEN, MATTHEW
3180 BISCAYNE BLVD.
MIAMI FL 33137**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '97	
TITLE	DV <input type="checkbox"/> DELETE	1.1 TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LIEBERMAN, HENRY	1.2 NAME	Michael Miller
STREET ADDRESS	20220 HIGHLANDS LAKES BLVD.	1.3 STREET ADDRESS	3180 Biscayne Boulevard
CITY-ST-ZIP	NO. MIAMI BEACH FL	1.4 CITY-ST-ZIP	Miami, Florida 33137
TITLE	STD <input type="checkbox"/> DELETE	2.1 TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROEDEL, JERRY	2.2 NAME	Gregory Brown
STREET ADDRESS	4975 NORTHWEST 82ND AVENUE	2.3 STREET ADDRESS	3180 Biscayne Boulevard
CITY-ST-ZIP	LAUDERHILL FL	2.4 CITY-ST-ZIP	Miami, Florida 33137
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	Executive Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SILVERMAN, IRWIN	3.2 NAME	Valera Jackson
STREET ADDRESS	3180 BISCAYNE BOULEVARD	3.3 STREET ADDRESS	1063 S.E. 6th Avenue
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	Dania, Florida 33004
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	Executive Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EARL, ILSE	4.2 NAME	Matthew Gissen
STREET ADDRESS	84 FAIRVIEW WEST	4.3 STREET ADDRESS	3180 Biscayne Boulevard
CITY-ST-ZIP	TEQUESTA FL	4.4 CITY-ST-ZIP	Miami, Florida 33137
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOLDER, JAY	5.2 NAME	
STREET ADDRESS	5990 BIRD ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	6.1 TITLE	
NAME	TREADWAY, DEEANN	6.2 NAME	
STREET ADDRESS	1717 NORTH BAYSHORE DR. SUITE 3256	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	6.4 CITY-ST-ZIP	

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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: *Gregory W. Brown* VP
GREGORY Brown
April 30, 1996 305-573-3784
Date Daytime Phone #

CR2E037 (12/95)