

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 720773

**FILED**  
**Jan 11, 2022**  
**Secretary of State**  
**0729785914CC**

**Entity Name:** ASSOCIATION OF INDEPENDENT SCHOOLS OF FLORIDA, INC.

**Current Principal Place of Business:**

1200 BRICKELL AVE  
SUITE 800  
MIAMI, FL 33131

**Current Mailing Address:**

12975 SW 6 ST  
MIAMI, FL 33184 US

**FEI Number: 59-2393307**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DIAZ-ZUBIETA, CAROL  
12975 SW 6 ST  
MIAMI, FL 33184 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** CAROL DIAZ-ZUBIETA

01/11/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            COHEN, PETER  
Address        6800 NERVIA ST  
City-State-Zip: CORAL GABLES FL 33146

Title            DIRECTOR  
Name            MCGHEE, JAMES JR  
Address        14850 SW 67 AVE  
City-State-Zip: MIAMI FL 33158

Title            DIRECTOR  
Name            BAPTISTE, AFUA  
Address        4645 N. STATE RD. 7  
City-State-Zip: LAUDERDALE LAKES FL

Title            TREASURER, DIRECTOR  
Name            DIAZ-ZUBIETA, CAROL  
Address        12975 SW 6 ST  
City-State-Zip: MIAMI FL

Title            DIRECTOR, VP  
Name            FLANDERS-RAMOS, ROWENA  
Address        1450 CITRUS OAKS AVE  
City-State-Zip: GOTHA FL

Title            DIRECTOR  
Name            LAURIE, DOUGLAS  
Address        12200 WEST BROWARD BLVD  
City-State-Zip: PLANTATION FL

Title            DIRECTOR  
Name            LEVY, EZRA  
Address        18900 NE 25 AVE  
City-State-Zip: N. MIAMI BEACH FL

Title            DIRECTOR  
Name            RICON, MERCEDES  
Address        10545 SW 97 AVE  
City-State-Zip: MIAMI FL

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** CAROL DIAZ-ZUBIETA

**TREASURER**

01/11/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR, VP  
Name RICON, MERCHY  
Address 10545 SW 97 AVE  
City-State-Zip: MIAMI FL

Title DIRECTOR  
Name BENITEZ, DANIEL  
Address 19200 PINES BOULEVARD  
City-State-Zip: PEMBROKE PINES FL 33029

Title DIRECTOR  
Name LATORRE, ANITA  
Address 12200 WEST BROWARD BOULEVARD  
City-State-Zip: PLANTATION FL 33325

Title DIRECTOR  
Name TROGE, BEN  
Address 10311 NW 58 STREET  
City-State-Zip: DORAL FL 33178

Title DIRECTOR  
Name ROTHFIELD, BRETT  
Address 16680 SW 81 ST  
City-State-Zip: MIAMI FL 33157

Title DIRECTOR, SECRETARY  
Name DUARTE-ROMERO, GINA  
Address 1600 SOUTHWEST 57TH AVENUE  
City-State-Zip: MIAMI FL 33155

Title DIRECTOR  
Name FEIN, GARY  
Address 6210 SOUTH CONGRESS AVENUE  
City-State-Zip: LANTANA FL 33462

Title DIRECTOR  
Name TURNER, JEFF  
Address 6769 CHURCH STREET  
City-State-Zip: JUPITER FL 33458

Title DIRECTOR, VP  
Name REPENSEK, CAROLE  
Address 11335 SW 112 CIRCLE LANE SOUTH  
City-State-Zip: MIAMI FL 33176

Title DIRECTOR  
Name NAJERA, JULIA  
Address 1945 SHERBOURNE ST  
City-State-Zip: WINTER GARDEN FL 34787