2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000435

Entity Name: AFTER SCHOOL PROGRAMS-SOUTH, INC.

FILED Apr 25, 2014 Secretary of State CC5531347020

Current Principal Place of Business:

1520 S. POWERLINE ROAD DEERFIELD BEACH, FL 33442

Current Mailing Address:

1520 S. POWERLINE ROAD DEERFIELD BEACH. FL 33442 US

FEI Number: 65-0915728 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WOLNEK, DAVID D 1520 S. POWERLINE ROAD DEERFIELD BEACH, FL 33442 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	D	Title	D

Name WOLNEK, DAVID Name CUTLER, ANN

Address 1520 S. POWERLINE ROAD Address 1520 S. POWERLINE ROAD

City-State-Zip: DEERFIELD BEACH FL 33442 City-State-Zip: DEERFIELD BEACH FL 33442

Title T Title D

Name COHN, ALLAN Name HALL, JAYNE

Address 1520 S. POWERLINE ROAD Address 1520 S. POWERLINE ROAD

City-State-Zip: DEERFIELD BEACH FL 33442 City-State-Zip: DEERFIELD BEACH FL 33442

Title D Title C

NameMOTLEY, SUSANNameCONSTANTINE, JAMESAddress1520 S. POWERLINE ROADAddress1520 S. POWERLINE ROADCity-State-Zip:DEERFIELD BEACH FL 33442City-State-Zip:DEERFIELD BEACH FL 33442

Title D Title C

Name GAZZANO, JULIEN Name KOPPERL, SID

Address 1520 S. POWERLINE ROAD Address 1520 S. POWERLINE ROAD

City-State-Zip: DEERFIELD BEACH FL 33442

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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: DAVID WOLNEK D 04/25/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D Title D

Name ROTH, TRACY Name SODIKOFF, NANCI

Address 1520 S. POWERLINE ROAD Address 1520 S. POWERLINE ROAD

City-State-Zip: DEERFIELD BEACH FL 33442 City-State-Zip: DEERFIELD BEACH FL 33442