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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 207720 (4)

1. Corporation Name

MONTANARI CLINICAL SCHOOL, INC.



Principal Place of Business

291 E 2ND STREET
P.O. BOX #1360
HIALEAH FL 33011

Mailing Address

291 E 2ND STREET
P.O. BOX #1360
HIALEAH FL 33011

3. Date Incorporated or Qualified
11/22/1957

3a. Date of Last Report
06/07/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MONTANARI, A J
291 E 2 ST
HIALEAH FL

81 Name

John S Yermack

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

291 E 2 ST

83

84 City

Hialeah

FL

85

Zip Code
33011

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

[Signature]

John S. Yermack

4-24-96

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

☐ DELETE

NAME

MONTANARI, A J

STREET ADDRESS

291 E 2ND STREET

CITY- ST- ZIP

HIALEAH, FLORIDA 0

TITLE

V

☐ DELETE

NAME

BARTLETT, HILDA

STREET ADDRESS

291 E 2ND STREET

CITY- ST- ZIP

HIALEAH, FLORIDA 0

TITLE

S

☐ DELETE

NAME

MONTANARI, MARION G

STREET ADDRESS

291 E 2ND STREET

CITY- ST- ZIP

HIALEAH, FLORIDA 0

TITLE

V

☐ DELETE

NAME

MONTANARI, A G

STREET ADDRESS

291 E 2ND STREET

CITY- ST- ZIP

HIALEAH, FLORIDA 0

TITLE

T

☐ DELETE

NAME

YERMACK, JOHN S

STREET ADDRESS

291 E 2ND STREET

CITY- ST- ZIP

HIALEAH, FLORIDA 0

TITLE

V

☐ DELETE

NAME

YERMACK, ADELE

STREET ADDRESS

291 E 2ND STREET

CITY- ST- ZIP

HIALEAH FL

TITLE

V

☐ DELETE

NAME

YERMACK, ADELE

STREET ADDRESS

291 E 2ND STREET

CITY- ST- ZIP

HIALEAH FL

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Yermack

4-24-96

305 8877543

Date

Daytime Phone #

CR2E034 (12/95)