

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 # 712256 (7)

1. Corporation Name
RANSOM-EVERGLADES SCHOOL, INC.



Principal Place of Business: 3575 MAIN HIGHWAY MIAMI FL 33133
Mailing Address: 3575 MAIN HIGHWAY MIAMI FL 33133

3. Date Incorporated or Qualified: 02/15/1967
3a. Date of Last Report: 02/01/1995

2. Principal Place of Business: 21 Ransom Everglades, 22 Suite, Apt. #, etc., 23 Miami, FL, 24 Zip 33133, 25 Country USA
2a. Mailing Address: 26 3575 Main Highway, 27 Suite, Apt. #, etc., 28 Miami, FL, 29 Zip 33133, 30 Country USA

4. FEI Number: 59-0659070
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$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: COTTON, JOHN P, 2045-A BRIDGEPORT AVE, COCONUT GROVE FL 33133
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 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: [Signature] DATE: 1/25/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGE S TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	STONE, ROBERT A	1.1 TITLE: PD	Buermann
STREET ADDRESS: 8600 SW 145TH ST	MIAMI FL	1.2 NAME: Eric Buermann	6075 SW 32nd Street
CITY-ST-ZIP: MIAMI FL		1.3 STREET ADDRESS: Miami, FL 33156-1960	
TITLE: VD	ARELLANO, AGUSTIN R	2.1 TITLE: VD	Greer
STREET ADDRESS: 9050 HAMMOCK LAKE DR	MIAMI FL	2.2 NAME: Evelyn Greer	5900 SW 37th Street
CITY-ST-ZIP: MIAMI FL		2.3 STREET ADDRESS: Miami, FL 33156	
TITLE: VD	MCCREA, DAVID B	3.1 TITLE: VD	Javenick
STREET ADDRESS: 1990 TIGERTAIL AVE	COCONUT GROVE FL	3.2 NAME: Barbara Javenick	369 Leucadendra Drive
CITY-ST-ZIP: COCONUT GROVE FL		3.3 STREET ADDRESS: Coral Gables, FL 33156	
TITLE: SD	BORN, DONNA KNOWLES	4.1 TITLE: SD	Stokes
STREET ADDRESS: 4821 GRANADA BLVD	CORAL GABLES FL	4.2 NAME: Elaine Stokes	121 Gavilan
CITY-ST-ZIP: CORAL GABLES FL		4.3 STREET ADDRESS: Coral Gables, FL 33143	
TITLE: TD	TILLET, WILLIAM R	5.1 TITLE: TD	McCrea
STREET ADDRESS: 10905 SNAPPER CREEK RD	MIAMI FL	5.2 NAME: David McCrea	1990 Tigertail Ave.
CITY-ST-ZIP: MIAMI FL		5.3 STREET ADDRESS: Coconut Grove, FL 33133	
TITLE: VD	SHUBIN, JOHN K	6.1 TITLE: VD	Tillett
STREET ADDRESS: 1699 TIGERTAIL AVE	COCONUT GROVE FL	6.2 NAME: William Tillett	10905 Snapper Creek Rd
CITY-ST-ZIP: COCONUT GROVE FL		6.3 STREET ADDRESS: Miami, FL 33156	

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: [Signature] DATE: 1/24/96 PHONE: 446-0045

CR2E037 (12/95)