

FILE NOW: FILING FEE IS \$61.25

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May 05 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



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 33137-4127

3. Date Incorporated or Qualified 12/28/1972  
3a. Date of Last Report 05/01/1996

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	4. FEI Number 59-1452736 Applied For Not Applicable	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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
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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 12	
TITLE	DV <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LIEBERMAN, HENRY	1.2 NAME	Vice President
STREET ADDRESS	20220 HIGHLANDS LAKES BLVD.	1.3 STREET ADDRESS	Michael Miller
CITY-ST-ZIP	NO. MIAMI BEACH FL	1.4 CITY-ST-ZIP	3180 Biscayne Boulevard 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	<del>D</del> <input checked="" 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	3180 Biscayne Boulevard
CITY-ST-ZIP	MIAMI FL -	3.4 CITY-ST-ZIP	Miami, Florida 33137
TITLE	<del>D</del> <input checked="" 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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: \_\_\_\_\_ February 19, 1997 305-573-2784

CR2E037 (9/96)