2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30380

FILED Jan 14, 2008 Secretary of State

Entity Name: COMMUNITIES IN SCHOOLS OF MIAMI, INC.

Current Principal Place of Business: New Principal Place of Business:

11965 SW 142 TERRACE UNIT 102

MIAMI, FL 331866730 US

Current Mailing Address: New Mailing Address:

11965 SW 142 TERRACE UNIT 102 MIAMI, FL 331866730 US

FEI Number: 65-0140488 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

RAFFALSKI, PETER

220 ALHAMBRA CIRCLE 5TH FLOOR
CORAL GABLES, FL 33134 US

MEJIA, ELIZABETH
11965 SW 142 TERRACE
UNIT 102
MIAMI, FL 33186 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: ELIZABETH MEJIA 01/14/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 MEJIA, ELIZABETH
 Name:
 MEJIA, ELIZABETH

 Address:
 11900 SW 128 STREET
 Address:
 11965 SW 142 TERRACE, UNIT 102

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: S () Delete Title: S (X) Change () Addition

 Name:
 RAFFALSKI, PETER
 Name:
 WILLIAMS, PATRICIA

 Address:
 220 ALHAMBRA CIR., 5TH FL
 Address:
 8620 SW 162 STREET

 City-St-Zip:
 CORAL GABLES, FL 33134
 City-St-Zip:
 MIAMI, FL 33157

Title: V () Delete Title: V (X) Change () Addition
Name: WILLIAMS, PATRICIA I Name: WARE, LISA I

Address: 8620 SW 162 STREET Address: 170 BUTTONWOOD DRIVE

Address: 8620 SW 162 STREET Address: 1/0 BUTTONWOOD DRIVE
City-St-Zip: MIAMI, FL 33157 City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete Title: () Change () Addition

 Name:
 JACOBS, RICHARD
 Name:

 Address:
 6246 SW 99 TERRACE
 Address:

 City-St-Zip:
 MIAMI, FL 33156
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELIZABETH MEJIA P 01/14/2008