2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43140

FILED Mar 26, 2007 Secretary of State

Entity Name: DADE ASSOCIATION OF ACADEMIC NON-PUBLIC SCHOOLS, INC.

Current P	Principal Place	of Business:	New Principal Place of Business:				
3755 SW : MIAMI, FL	32ND STREET . 33165 US		3000 SW 87TH AVENUE MIAMI, FL 33165 US				
Current M	/lailing Addres	ss:	New Mailing Address:	New Mailing Address:			
	32ND STREET . 33165 US		3000 SW 87TH AVENUE MIAMI, FL 33165 US				
El Number	r: 65-0289605	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired (()			
Name and	d Address of C	Current Registered Agent:	Name and Address of New Registered Agent:				
DAANS 3755 SW : MIAMI, FL	32ND STEET . 33165 US		DAANS 3000 SW 87TH AVENUE MIAMI, FL 33165 US				
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its registered office or registered agent, or	both,			
SIGNATU	RE: ANGELO	PALMIERI	03/26/2007				
	Electror	nic Signature of Registered Age	ent Date				
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTOR			
itle: lame: lddress: City-St-Zip:	PALMIERI, AND 3000 SW 87 AV	/ENUE	Title: () Change () Addition Name: Address: City-St-Zip:				
Title: lame: Address: Dity-St-Zip:	S () MCGHEE, JAM 6050 SW 57 AV MIAMI, FL 331	/E	Title: () Change () Addition Name: Address: City-St-Zip:				
Fitle: Name: Address: Dity-St-Zip:	D () CASANOVA, AL 8721 SW 93RE MIAMI, FL		Title: () Change () Addition Name: Address: City-St-Zip:				
	TD ()	Delete	Title: TD (X) Change () Addition Name: LOGAN, TERI Address: 200 NW 109 AVENUE				
Fitle: Name: Nddress: City-St-Zip:	DUNN, RAYMO 12205 SW 70 0 MIAMI, FL		City-St-Zip: MIAMI, FL 33172				
lame: \ddress:	DUNN, RAYMO 12205 SW 70 (MIAMI, FL	Delete E BLVD.	City-St-Zip: MIAMI, FL 33172 Title: () Change () Addition Name: Address: City-St-Zip:				

I hereby certify that the information supplied with this filing does not qualify for the 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:	AN	O.	/IIERI				D	03/26/2007	
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