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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

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THE NOVA SOUTHEASTERN LINIVERSITY HEALTH PROFESSI

So S. Name and Address of Europes Based on State Properties of Country State	ONS DIVISION FOUNDATION, INC.										
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2. Principal Piace of Business 2. Mailing Address 3. Certificate of Status Desired \$8.75 Additional \$8.7	FT. LAUDERDA		FT. LAUDERDALE FL 33328					12/20/1993	id		
2. Mainling Address 31											
Sulfe, Apt. #, etc.	2. Principal P	lace of Business	2a. Ma	ailing Address							
Sulfo, Apt. #, etc. Sulfo, Apt. #, etc.	21		26] '	Certificate of Status Desired			
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22)	City & Stat			n. P. Ctata				**			*
2P Country St. Pite corporation were or has paid the current year integrible Personal Property Tax of Use June 30. Personal Address of New Registered Agent. 10. Name and Address of New Registered Agent. 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florids Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered agent. of John, in the State of Florids. Schock change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in Immitted with a decay of the provisions of Section 67.1503. Personal Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ITIE D DBLETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. ITIE D DBLETE 15. ITIE C Change Addition MAME JONAS, ROYAL F ESO 300 71ST STREET, # 415 BELETE 31. ITIE D DBLETE 31. ITIE C JONAS ROYAL F ESO 300 71ST STREET, # 415 32. WAME 32. WAME 32. WAME 32. WAME 32. WAME 32. WAME 33. WALE ALONESS 300 71ST STREET, # 415 34. CMY-ST-2P TOTAL ALONESS 300 71ST STREET, # 415 35. WALE ALONESS 300 71ST STREET, * 415 35. WALE ALONESS 300 71ST STREET, * 415 3		0		y & State]]	Is this nonprofit corporation a	4		ın?
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14. I 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.

954/262-1501

FILED

Feb 19 1998 8:00am

Secretary of State

2/6/98