

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000009126

**Entity Name:** NEW ALTERNATIVE EDUCATION HIGH SCHOOL OF MIAMI-DADE COUNTY, INC.

**FILED**  
**Mar 28, 2014**  
**Secretary of State**  
**CC1268443086**

**Current Principal Place of Business:**

301 SOUTHERN BOULEVARD  
WEST PALM BEACH, FL 33405

**Current Mailing Address:**

301 SOUTHERN BOULEVARD  
WEST PALM BEACH, FL 33405

**FEI Number: 26-4274479**

**Certificate of Status Desired: No**

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

WOOD, JEFFREY S  
ONE FINANCIAL PLAZA  
SUITE 2602  
FORT LAUDERDALE, FL 33394 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: JEFFREY S WOOD**

**03/28/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name QUIRANTES, ADRIANA  
Address 757 NW 27TH AVENUE, SUITE 200  
City-State-Zip: MIAMI FL 33125

Title D  
Name DEL VALLE, HUMBERTO  
Address 7414 SW 48 STREET  
City-State-Zip: MIAMI FL 33155

Title DIRECTOR  
Name PAUL, IRA  
Address 18495 NW 78TH AVENUE  
City-State-Zip: HIALEAH FL 33015

Title DIRECTOR  
Name LIVERGOOD, LAURA  
Address 6895 EASTVIEW DRIVE  
City-State-Zip: LANTANA FL 33462

Title DIRECTOR  
Name BETHEL, CHARLES G  
Address 8441 NW 197TH TERRACE  
City-State-Zip: HIALEAH FL

Title DIRECTOR, CHAIR  
Name BRACY, STEVEN F  
Address 537 LES JARDIN DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

*I hereby 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 all other like empowered.*

**SIGNATURE: STEVEN BRACY**

**CHAIR**

**03/28/2014**

Electronic Signature of Signing Officer/Director Detail

Date