

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra S. Morton
Secretary of State
(305) 374-1000 (TOLL FREE 1-800-352-3733)

FILED
SECRETARY OF STATE
OFFICE OF CORPORATIONS

95 MAY -1 AM 11:47

DOCUMENT # 740531

(9)

FLANDERS G ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 09/19/1977 3a. Date of Last Report 03/24/1994

4. FET Number 59-1819234 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

Principal Place of Business Mailing Address
PRIME MANAGEMENT GROUP, INC.
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487
PRIME MANAGEMENT GROUP, INC.
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

2. Principal Place of Business 2a. Mailing Address

21. Suite Apt. # etc. 26. Suite Apt. # etc.

22. City & State 27. City & State

23. Zip 28. Zip

24. Country 25. Country 29. Country 30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SPILFUGEL, MORRIS
FLANDERS G-291 KINGS POINT
DELRAY BEACH FL 33484

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature of person filing must be signed in presence of the registered agent

Signature of registered agent required when filing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE P
NAME SPILFUGEL, MORRIS
STREET ADDRESS KINGS PT. FLANDERS G 2919
CITY, ST, ZIP DELRAY BEACH FL
2. TITLE V
NAME KAPLAN, JACK
STREET ADDRESS KINGS PT. FLANDERS G 316
CITY, ST, ZIP DELRAY BEACH FL
3. TITLE S
NAME COHEN, MATTHEW
STREET ADDRESS KINGS PT. FLANDERS G 324
CITY, ST, ZIP DELRAY BEACH FL
4. TITLE T
NAME COHEN, FRANCES
STREET ADDRESS KINGS PT. FLANDERS 332
CITY, ST, ZIP DELRAY BEACH FL
5. TITLE D
NAME TERMINI, THOMAS
STREET ADDRESS KINGS PT. FLANDERS G 304
CITY, ST, ZIP DELRAY BEACH FL
6. TITLE D
NAME DE SOTO, RAYMOND
STREET ADDRESS FLANDERS 5 330
CITY, ST, ZIP DELRAY BEACH FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP
3.1 TITLE ☒ Change ☐ Addition
3.2 NAME Cohen, Frances
3.3 STREET ADDRESS 332 Flinders G
3.4 CITY, ST, ZIP Delray Bch, FL 33484
4.1 TITLE ☒ Change ☐ Addition
4.2 NAME Lux, Florence
4.3 STREET ADDRESS 315 Flinders G
4.4 CITY, ST, ZIP Delray Bch, FL 33484
5.1 TITLE ☒ Change ☐ Addition
5.2 NAME Adelson, Herman
5.3 STREET ADDRESS 331 Flinders G
5.4 CITY, ST, ZIP Delray Bch, FL 33484
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 419.07(9)(b), 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 417, Florida Statutes, and that my name appears on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Morris Spilfugel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MORRIS SPILFUGEL 459-3361
Typed Name