

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED AND FILED**

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



OFFICE OF THE SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P94000067424 (9)**

1. Corporation Name  
**MARDER & ASSOCIATES INC.**

Principal Place of Business: **2100 NW 33RD TERRACE COCONUT CREEK FL 33066**  
 Mailing Address: **2100 NW 33RD TERRACE COCONUT CREEK FL 33066**

(DO NOT WRITE IN THIS SPACE)

3. Date incorporated or qualified	3a. Date of Last Report
	<b>09/12/1994</b>
4. FTT Number	Applied For
<b>65-0525583</b>	<input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

2. Principal Place of Business	2a. Mailing Address
<b>2100 NW 33RD TERRACE COCONUT CREEK FL 33066</b>	<b>2100 NW 33RD TERRACE COCONUT CREEK FL 33066</b>
21. State, Apt. # etc.	26. State, Apt. # etc.
<b>22</b>	<b>27</b>
22. City & State	27. City & State
<b>23</b>	<b>28</b>
23. Zip	28. Zip
<b>24</b>	<b>29</b>
24. Country	29. Country
<b>25</b>	<b>30</b>

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>WOLFE, LARRY 200-A JOHN KNOX ROAD TALLAHASSEE FL 32303-6643</b>		B1 Name	
		B2 Street Address (P.O. Box Number is Not Acceptable)	
		B3	
		B4 City	<b>FL</b> B5 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 officer 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 Registered Agent required when modifying)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	<b>D</b>	1.1 TITLE	<b>D/P/T</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2. NAME	<b>MARDER, DAVID</b>	1.2 NAME	
3. STREET ADDRESS	<b>2100 NW 33RD TERRACE</b>	1.3 STREET ADDRESS	
4. CITY, ST, ZIP	<b>COCONUT CREEK FL 33066</b>	1.4 CITY, ST, ZIP	
5. TITLE	<b>D</b>	2.1 TITLE	<b>D/P/S</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6. NAME	<b>MARDER, SHERRY</b>	2.2 NAME	
7. STREET ADDRESS	<b>2100 NW 33RD TERRACE</b>	2.3 STREET ADDRESS	
8. CITY, ST, ZIP	<b>COCONUT CREEK FL 33066</b>	2.4 CITY, ST, ZIP	
9. TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME		3.2 NAME	
11. STREET ADDRESS		3.3 STREET ADDRESS	
12. CITY, ST, ZIP		3.4 CITY, ST, ZIP	
13. TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME		4.2 NAME	
15. STREET ADDRESS		4.3 STREET ADDRESS	
16. CITY, ST, ZIP		4.4 CITY, ST, ZIP	
17. TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME		5.2 NAME	
19. STREET ADDRESS		5.3 STREET ADDRESS	
20. CITY, ST, ZIP		5.4 CITY, ST, ZIP	
21. TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME		6.2 NAME	
23. STREET ADDRESS		6.3 STREET ADDRESS	
24. CITY, ST, ZIP		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 119.07(3)(a), Florida Statutes. I further certify that the information included 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 147, Florida Statutes, and that my name appears on Block 12 or 13 or 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, or 24 of this report, or as an attachment with an address.

SIGNATURE: *David Marder* **DAVID MARDER** **3/21/95** (505) 970-4139  
(Signature and typed or printed name of signing officer or director)