FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 11:47

DOCUMENT # 738696 (4)

1. Corporation Name

FLANDERS D ASSOCIATION, INC.

1994 List Place of Business

PRIME MANAGEMENT GROUP INC
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

Mailing Address

PRIME MANAGEMENT GROUP INC
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/20/1977
3a. Date of Last Report: 03/24/1994
4. FEI Number: 59-1774407 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip 24 / Country 25	Zip 29 / Country 30

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

9. Name and Address of Current Registered Agent

RAIBLE, RONALD
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

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 DATE

12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	FENSTER, BERNARD	1.2 NAME	
STREET ADDRESS	KINGS PT. FLANDERS D 157	1.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	DRESNER, MARVIN	2.2 NAME	
STREET ADDRESS	KING PT. FLANDERS D 160	2.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	S/D ☑ Change ☐ Addition
NAME	WAXBERG, FANNY	3.2 NAME	Waxberg, Fanny
STREET ADDRESS	FLANDERS D 165	3.3 STREET ADDRESS	165 Flanders D
CITY-ST-ZIP	DELRAY BEACH FL	3.4 CITY-ST-ZIP	Delray Bch, FL 33484
TITLE	T	4.1 TITLE	T/D ☑ Change ☐ Addition
NAME	SCHACHER, DAVID	4.2 NAME	Schacher, David
STREET ADDRESS	KINGS PT. FLANDERS D 155	4.3 STREET ADDRESS	155 Flanders D
CITY-ST-ZIP	DELRAY BEACH FL	4.4 CITY-ST-ZIP	Delray Bch, FL 33484
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	KAPLAN, ARTHUR	5.2 NAME	
STREET ADDRESS	KINGS PT. FLANDERS D 161	5.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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)(k), 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.

SIGNATURE: Bernard L. Fenster BERNARD L. FENSTER 5/8/95 499 9257

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #