

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # 738696**

**(4)**

1. Corporation Name

**FLANDERS D ASSOCIATION, INC.**



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

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**04/20/1977**

3a. Date of Last Report

**05/01/1995**

4. FEI Number

**59-1774407**

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**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes ☒ No

10. Name and Address of New Registered Agent

**RAIBLE, RONALD  
1051 SOUTH ROGERS CIRCLE  
BOCA RATON FL 33487**

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

☐ DELETE

NAME

**FENSTER, BERNARD**

STREET ADDRESS

**KINGS PT. FLANDERS D 157**

CITY-ST-ZIP

**DELRAY BEACH FL**

TITLE

V

☐ DELETE

NAME

**DRESNER, MARVIN**

STREET ADDRESS

**KING PT. FLANDERS D 160**

CITY-ST-ZIP

**DELRAY BEACH FL**

TITLE

DS

☐ DELETE

NAME

**WAXBERG, FANNY**

STREET ADDRESS

**165 FLANDERS D**

CITY-ST-ZIP

**DELRAY BEACH FL**

TITLE

DT

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NAME

**SCHACHER, DAVID**

STREET ADDRESS

**155 FLANDERS D**

CITY-ST-ZIP

**DELRAY BEACH FL**

TITLE

D

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NAME

**KAPLAN, ARTHUR**

STREET ADDRESS

**KINGS PT. FLANDERS D 161**

CITY-ST-ZIP

**DELRAY BEACH FL**

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**AGENT**

☐ Change ☒ Addition

**RAIBLE, RONALD**

**6300 PARK OF COMMERCE BLVD.**

**BOCA RATON, FL 33487**

☐ Change ☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME

OR

**3-29-96**

**9974045-**

Date

Daytime Phone #

CR2E037 (12/95)

5-1-96