FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 20 PM 3:35

DOCUMENT # 532646 (7)

1. Corporation Name
M.A. KEMPNER, INC.

Principal Place of Business	Mailing Address
11820 FOUNTAIN SIDE CIR. BOYNTON BCH. FL 33437	11820 FOUNTAIN SIDE CIR. BOYNTON BCH. FL 33437

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/29/1977
3a. Date of Last Report: 03/08/1994

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

4. FEI Number: 59-1371443 ☐ 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

9. Name and Address of Current Registered Agent

SEGER, GLENN A.
5360 NW 55TH BLVD
COCONUT CREEK FL 33073

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 register 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Glenn A. Seger — Glenn A. Seger — 1/23/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when name is changed.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	P	1.1 TITLE	☐ Change
NAME	SEGER, GLENN A.	1.2 NAME	
STREET ADDRESS	5360 NW 55TH BLVD APT #104	1.3 STREET ADDRESS	4740 N.W. 74TH PLACE
CITY-ST-ZIP	CONONUT CREEK FL	1.4 CITY-ST-ZIP	COCONUT CREEK FL. 33073
TITLE	D	2.1 TITLE	☐ Change
NAME	KEMPNER, MARVIN A.	2.2 NAME	
STREET ADDRESS	11820 FOUNTAINSIDE CIR	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL	2.4 CITY-ST-ZIP	
TITLE	ST	3.1 TITLE	☐ Change
NAME	SEGER, CANDEE	3.2 NAME	
STREET ADDRESS	5360 NW 55TH BLVD APT #104	3.3 STREET ADDRESS	
CITY-ST-ZIP	CONONUT CREEK FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change
NAME	MAISEL, DANIEL	4.2 NAME	
STREET ADDRESS	6141 EVIAN PL.	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		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)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Glenn A. Seger — Glenn A. Seger — 1/16/95 — 305-481-9162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0437721 FP