

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 714816 (6)

1. Corporation Name

THE MAE VOLEN SENIOR CENTER, INC.



Principal Place of Business

1515 W. PALMETTO PARK ROAD
PO BOX 2468
BOCA RATON FL 33486
US

Mailing Address

P.O. BOX 2468
PO BOX 2468
BOCA RATON FL 33427
US

3. Date Incorporated or Qualified
06/21/1968

3a. Date of Last Report
02/15/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
59-2695062

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

10. Name and Address of New Registered Agent

RICE, HELEN M.
1515 W. PALMETTO PARK ROAD
POST OFFICE BOX 2468
BOCA RATON FL 33486-9468

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: John E. Zimmerman, Dir/Imm past Pres

John E. Zimmerman

2/13/96

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE : PD
NAME : NEASE, MARIAN PEARLMA
STREET ADDRESS : 5355 TOWN CENTER ROAD
CITY - ST - ZIP : BOCA RATON, FL 00000

DELETE

1.1 TITLE :
1.2 NAME :
1.3 STREET ADDRESS :
1.4 CITY - ST - ZIP :

800001746456
-03/18/96--01032--008
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TITLE : VD
NAME : FRANKEL, HENRIETTA
STREET ADDRESS : 350 S. OCEAN BLVD. #6-C
CITY - ST - ZIP : BOCA RATON FL

DELETE

2.1 TITLE :
2.2 NAME :
2.3 STREET ADDRESS :
2.4 CITY - ST - ZIP :

VD
LEON M. WEEKES
777 E. Atlantic Ave.
Delray Beach, FL 33484

TITLE : TD
NAME : SNYDER, JOSEPH G.
STREET ADDRESS : 1334 S.W. 14TH ST
CITY - ST - ZIP : BOCA RATON FL

DELETE

3.1 TITLE :
3.2 NAME :
3.3 STREET ADDRESS :
3.4 CITY - ST - ZIP :

IPPD
JOHN E. ZIMMERMAN
1771 Thatch Palm Dr.
Boca Raton, FL 33432

TITLE : TD
NAME : WALTON, R. KEITH
STREET ADDRESS : 2101 NW 2ND AVE.
CITY - ST - ZIP : BOCA RATON FL

DELETE

4.1 TITLE :
4.2 NAME :
4.3 STREET ADDRESS :
4.4 CITY - ST - ZIP :

***61.25

TITLE : SD
NAME : STARKOFF, FLORENCE
STREET ADDRESS : 4301 N OCEAN BLVD
CITY - ST - ZIP : BOCA RATON FL

DELETE

5.1 TITLE :
5.2 NAME :
5.3 STREET ADDRESS :
5.4 CITY - ST - ZIP :

D
SUE McMASTER
920 N W 4th Ave.
Boca Raton, FL 33432

TITLE : VD
NAME : NEASE, MARIAN
STREET ADDRESS : 5355 TOWN CENTER RD, 801
CITY - ST - ZIP : BOCA RATON FL

DELETE

6.1 TITLE :
6.2 NAME :
6.3 STREET ADDRESS :
6.4 CITY - ST - ZIP :

VD
CHERYL CULP
1277 W. Palmetto Park Road
Boca Raton, FL 33486

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:

John E. Zimmerman

2/13/96

407-395-8820

Date:

Daytime Phone:

CR2E037 (12/95)