2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: SIGNATO

FILED May 03, 2005 8:00 am Secretary of State

Daytime Phone #

									05.02.20	205 0010	4.000 ****	11.05
DOCUMENT # 738699 1. Entity Name FLANDERS O ASSOCIATION, INC.											4 022 **** 6	01.23
Principal Place of Business C/O PRIME MANAGEMENT GROUP, INC. 6300 PARK OF COMMERCE BLVD BACO RATON, FL 33487 US			C/O P 6300	Mailing Address C/O PRIME MANAGEMENT GROUP, INC. 6300 PK OF COMMERCE BLVD BACO RATON, FL 33487 US				 		19529 Hillin		18/1184 St. 1884
2. Principal Place of Business			3. Maili	3. Mailing Address								
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.				02242005	Chg-NP	CR	2E037 (10/03)	
City & State			City	City & State				4. FEI Numb 59-178				Applied For Not Applicable
Žip		Country	Zip		Co.	intry		5. Certificate	of Status Des	sired 🔲	\$8.75 A	
	6. Name	and Address of Curren	t Registered	Agent				7. Name and	Address of I	New Registe	red Agent	
-					_	Name	TI	10/00	c 01	1000	JOT-	
SWATT, MYRON 6300 PK OF COMMERCE BLVD						Street Address (SP) Box Number is No December (SP) Box Number is No December (SP) STE						LNC
BOCA RA											Boul	aland
								A RATE			FL Zingo	3487
8. The above named entity submits this statement for the purpose of changing its registered office or registers.									em familiar with	3 48 /		
	tions of regist		or the purpo	oc or onanging it	3 regisiere			ad agent, or bo	an in the State	S OF FRIENDS.	arriarina wa	i, and accept
SIGNATURE .	ARN	IE BERNS or printed name of registered ager	TEIN	cable (AV)	E. Registere		7	when reinstating)	·		ATE	
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		e is \$61.25 lay 1, 2005		9. Election Ca Trust Fund				\$5.00 May E Added to Fees			heck payable epartment of t	
10.			DIRECTORS				<u> </u>	\$5.00 May E Added to Fees		Florida O		State
TITLE	Due by N	OFFICERS AND D	DIRECTORS		Conhibusi 11.	ion.	<u> </u>	\$5.00 May E Added to Fees		Florida O	epertment of	State N 10
TITLE NAME	PD MANIFF,	OFFICERS AND D	PIRECTORS	Trust Fund	11. TITLE	ión.	<u> </u>	\$5.00 May E Added to Fees		Florida O	epertment of S	State N 10
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TITLE NAME STREET ADDRESS	PD MANIFF, STAN DELRAY I	OFFICERS AND D SHEPPARD DERS O BEACH, FL	PIRECTORS	Trust Fund	11. TITLE NAME STREE	E E ET ADDRESS -ST-ZIP	<u> </u>	\$5.00 May E Added to Fees		Florida O	epertment of S	State N 10 Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MANIFF, 3715 FLAN DELRAY I	OFFICERS AND D SHEPPARD DERS O BEACH, FL JM, AL	DIRECTORS	Trust Fund	11. TITLE NAME STREE CITY TITLE NAME	E E ET ADDRESS -ST-ZIP	<u> </u>	\$5.00 May E Added to Fees		Florida O	epertment of s	State N 10 Addition
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NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR