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

APPROVED AND FILED
95 APR 19 AM 8:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 759533 (3)

1. Corporation Name
PALM BEACH COUNTY CHAPTER NO. 148 OF THE INSTITU TE OF FINANCIAL EDUCATION, INC.

Principal Place of Business	Mailing Address
~~C/O R. KHALID~~ C. Loder ~~P.O. BOX 10073~~ 6801 Lake Worth Rd ~~RIVIERA BEACH FL 33419~~ Lake Worth, Fl 33467	~~C/O R. KHALID~~ C. Loder ~~P.O. BOX 10073~~ 6801 Lake Worth Rd. ~~RIVIERA BEACH FL 33419~~ Lake Worth, Fl. 33467

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/07/1981
3a. Date of Last Report: 04/14/1994
4. FEI Number: 59-0839942 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 c/o C. Loder	26 C. Loder
Suite, Apt. #, etc. 22 6801 Lake Worth Rd.	Suite, Apt. #, etc. 27 6801 Lake Worth Rd.
City & State 23 Lake Worth, Fl	City & State 28 Lake Worth, Fl.
Zip 24 33467 Country 25 USA	Zip 29 33467 Country 30 USA

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	10. Name and Address of New Registered Agent
KHALID, RIZWANA 660 U S HWY #1 N PALM BCH FL 33408	81 Name: CHERYL LODER 82 Street Address (P.O. Box Number is Not Acceptable): 6801 Lake Worth Road 83 84 City: Lake Worth FL 85 Zip Code: 33467

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: Cheryl Loder — 4-10-95
Signature, type 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	PD	1.1 TITLE	D	☒ Change ☐ Addition
NAME	KHALID, RIZWANA	1.2 NAME		
STREET ADDRESS	660 U S HWY #1	1.3 STREET ADDRESS		
CITY-ST-ZIP	N PALM BCH FL	1.4 CITY-ST-ZIP		
TITLE	VTD	2.1 TITLE	VTD	☒ Change ☐ Addition
NAME	BARNHART, MARY LOU	2.2 NAME	RUTH SLUTH	
STREET ADDRESS	7239 W ATLANTIC AVE	2.3 STREET ADDRESS	1818 So. Australian Ave, Suite 400	
CITY-ST-ZIP	DELRAY BCH FL	2.4 CITY-ST-ZIP	West Palm Beach, Fl. 33409	
TITLE	SD	3.1 TITLE		☐ Change ☐ Addition
NAME	GILLEN, BRUCE	3.2 NAME		
STREET ADDRESS	20 S WATERWAY RD	3.3 STREET ADDRESS		
CITY-ST-ZIP	TEQUESTA FL	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE	VSD	☒ Change ☐ Addition
NAME	DUMICH, HELENA	4.2 NAME	Bonner English	
STREET ADDRESS	11400 S.E. FED HWY	4.3 STREET ADDRESS	4400 PGA Blvd, Suite 200	
CITY-ST-ZIP	HOBE SOUND FL	4.4 CITY-ST-ZIP	Palm Beach Gardens, Fl 33410	
TITLE	VD	5.1 TITLE	PD	☒ Change ☐ Addition
NAME	LODER, CHERYL	5.2 NAME		
STREET ADDRESS	6801 LAKE WORTH RD	5.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL	5.4 CITY-ST-ZIP		
TITLE	VD	6.1 TITLE		☐ Change ☐ Addition
NAME	O'BRIEN, SUSAN	6.2 NAME		
STREET ADDRESS	3300 PGA BLVD	6.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BCH GDNS FL	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: Cheryl Loder (CHERYL LODER) 4-10-95 (407) 964-6100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — [illegible] Phone #

0044444