

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Northcutt Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G47046 (9)

1. Corporation Name:
THE NATIONAL ASSOCIATION OF HOME OWNERS, INC.

Principal Place of Business % ALAN J. WERKSMAN STE. 100 INTERCENTER 160 SW 12TH AVENUE DEERFIELD BEACH FL 33442-0102	Mailing Address % ALAN J. WERKSMAN STE. 100 INTERCENTER 160 SW 12TH AVENUE DEERFIELD BEACH FL 33442-0102
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2. Principal Place of Business 21 Suite, Apt. #, etc 22 Suite 101B 23 City & State 24 Zip 25 Country	2b. Mailing Address 26 Suite, Apt. #, etc 27 Suite 101B 28 City & State 29 Zip 30 Country
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9. Name and Address of Current Registered Agent

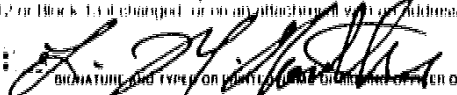
WERKSMAN, ALAN J.
 160 S.W. 12TH AVE. #101B
 DEERFIELD BEACH FL 33442-0102

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 85 Zip Code

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. TITLE PD 12. NAME ROSENTHAL, LAWRENCE M. 13. STREET ADDRESS 10275 COLLINS AVE #1109 14. CITY, ST, ZIP BAL HARBOUR FL	☐ Change ☐ Addition	11. TITLE 12. NAME 13. STREET ADDRESS 14. CITY, ST, ZIP	☐ Change ☐ Addition
11. TITLE S 12. NAME BERNSTEIN, JOYCE 13. STREET ADDRESS 3385 PINEWALK DRIVE N 14. CITY, ST, ZIP MARGATE FL	☒ Change ☐ Addition	11. TITLE 12. NAME 13. STREET ADDRESS 14. CITY, ST, ZIP	☐ Change ☐ Addition
11. TITLE T 12. NAME DICKSTEIN, MYRON 13. STREET ADDRESS 175 E 74TH ST #6B 14. CITY, ST, ZIP NEW YORK NY	☐ Change ☐ Addition	11. TITLE 12. NAME 13. STREET ADDRESS 14. CITY, ST, ZIP	☐ Change ☐ Addition
11. TITLE NAME 13. STREET ADDRESS 14. CITY, ST, ZIP	☐ Change ☐ Addition	11. TITLE 12. NAME 13. STREET ADDRESS 14. CITY, ST, ZIP	☐ Change ☐ Addition
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14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 139.07(3)(b), Florida Statutes. I further certify that the information indicated on the 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 to this report.

SIGNATURE:  **L. M. Rosenthal** 4/28/95 (905)866-1777

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