

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # K73019 (7)

1. Corporation Name

ORGANIZATIONAL RESOURCES, INC.

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 17 AM 11:31

Principal Place of Business

**% KATHLEEN COTY RASKIN
SUITE 104
BOCA RATON FL 33432
US**

Mailing Address

**399 W. CAMINO GARDENS BLVD
SUITE 104
BOCA RATON FL 33432
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/14/1989

3a. Date of Last Report

01/19/1994

4. FEI Number

65-0113156

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

2. Principal Place of Business

21 8549 Surrey Lane

2a. Mailing Address

26 8549 Surrey Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Boca Raton FL

City & State

28 Boca Raton FL

Zip

24 33496

Country

25 USA

Zip

29 33496

Country

30 USA

9. Name and Address of Current Registered Agent

**RASKIN, KATHLEEN COTY
8549 SURREY LANE
BOCA RATON FL 33496**

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 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

(Signature of Registered Agent or Registered Agent and the Corporation)

(Signature of Registered Agent or Registered Agent and the Corporation)

12. OFFICERS AND DIRECTORS

12.1 NAME	D RASKIN, KATHLEEN COTY
12.2 STREET ADDRESS	8549 SURREY LANE
12.3 CITY, ST, ZIP	BOCA RATON FL
12.4 TITLE	
12.5 NAME	
12.6 STREET ADDRESS	
12.7 CITY, ST, ZIP	
12.8 TITLE	
12.9 NAME	
12.10 STREET ADDRESS	
12.11 CITY, ST, ZIP	
12.12 TITLE	
12.13 NAME	
12.14 STREET ADDRESS	
12.15 CITY, ST, ZIP	
12.16 TITLE	
12.17 NAME	
12.18 STREET ADDRESS	
12.19 CITY, ST, ZIP	
12.20 TITLE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	☐ Change ☐ Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY, ST, ZIP	
13.5 TITLE	☐ Change ☐ Addition
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY, ST, ZIP	
13.9 TITLE	☐ Change ☐ Addition
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY, ST, ZIP	
13.13 TITLE	☐ Change ☐ Addition
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY, ST, ZIP	
13.17 TITLE	☐ Change ☐ Addition
13.18 NAME	
13.19 STREET ADDRESS	
13.20 CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(1)(b), Florida Statutes. I further certify that the information submitted 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 transfer commissioner. I execute this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, on corporation record with no addition.

SIGNATURE:

Kathleen Raskin
Kathleen Raskin
President

1/10/95

407-997-7382