

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

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95 MAY -1 PM 1:54

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M05187 (3)

**1. Corporation Name
DCA HOMES OF CENTRAL FLORIDA, INC.**

Principal Place of Business % MORRIS J. WATSKY, ESQ. 700 NW 107TH AVENUE 4TH FLOOR MIAMI FL 33172	Mailing Address % MORRIS J. WATSKY, ESQ. 700 NW 107TH AVENUE 4TH FLOOR MIAMI FL 33172
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/14/1984	3a. Date of Last Report 05/01/1994
4. FEI Number 59-2460033	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	
7. This corporation has not been exempted from filing its Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Name and Address of Current Registered Agent	29. Name and Address of New Registered Agent

WATSKY, MORRIS J., ESQ. 700 NW 107TH AVENUE 4TH FLOOR MIAMI FL 33172

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83. City	84. State	85. Zip Code
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11. Pursuant to the provisions of Sections 607.04(2) and 607.15(4), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent of 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 Sections 607.04(2) and 607.15(4), Florida Statutes.

SIGNATURE _____ **DATE** _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
12.1 NAME	DC MILLER, LEONARD	13.1 NAME	☐ Change ☐ Addition
12.2 STREET ADDRESS	700 N.W. 107TH AVE.	13.2 STREET ADDRESS	☐ Change ☐ Addition
12.3 CITY, ST., ZIP	MIAMI FL	13.3 CITY, ST., ZIP	☐ Change ☐ Addition
12.4 NAME	SVD BOLOTIN, IRVING	13.4 NAME	☒ Change ☐ Addition
12.5 STREET ADDRESS	700 N.W. 107TH AVE.	13.5 STREET ADDRESS	☐ Change ☐ Addition
12.6 CITY, ST., ZIP	MIAMI FL	13.6 CITY, ST., ZIP	☐ Change ☐ Addition
12.7 NAME	VD PEKOR, ALLAN J.	13.7 NAME	☐ Change ☐ Addition
12.8 STREET ADDRESS	700 N.W. 107TH AVE.	13.8 STREET ADDRESS	☐ Change ☐ Addition
12.9 CITY, ST., ZIP	MIAMI FL	13.9 CITY, ST., ZIP	☐ Change ☐ Addition
12.10 NAME	AS SIERRA, KATHLEEN E.	13.10 NAME	☐ Change ☐ Addition
12.11 STREET ADDRESS	700 N.W. 107TH AVE.	13.11 STREET ADDRESS	☐ Change ☐ Addition
12.12 CITY, ST., ZIP	MIAMI FL	13.12 CITY, ST., ZIP	☐ Change ☐ Addition
12.13 NAME	VT SALEDA, M.E.	13.13 NAME	☐ Change ☐ Addition
12.14 STREET ADDRESS	700 N.W. 107TH AVE.	13.14 STREET ADDRESS	☐ Change ☐ Addition
12.15 CITY, ST., ZIP	MIAMI FL	13.15 CITY, ST., ZIP	☐ Change ☐ Addition
12.16 NAME	AS SANTAELLA, GRACE	13.16 NAME	☐ Change ☐ Addition
12.17 STREET ADDRESS	700 NW 107TH AVE	13.17 STREET ADDRESS	☐ Change ☐ Addition
12.18 CITY, ST., ZIP	MIAMI FL	13.18 CITY, ST., ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.04(2)(b), Florida Statutes. I further certify that the information indicated on this annual report is a true and correct statement of the corporation and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the person or persons empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears on the filing of this report as required by the Florida Statutes.

SIGNATURE: *Grace Santaella* **Grace Santaella** **4/17/95 (305) 229-6400**