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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

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 33172-3161



3. Date Incorporated or Qualified

09/14/1984

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

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

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

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 officer or director 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 ☐ DELETE

NAME
DC
MILLER, LEONARD
700 N.W. 107TH AVE.
MIAMI FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
VD
BOLOTIN, IRVING
700 N.W. 107TH AVE.
MIAMI FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
VD
PEKOR, ALLAN J.
700 N.W. 107TH AVE.
MIAMI FL

2.2 NAME

TITLE ☐ DELETE

NAME
AS
SIERRA, KATHLEEN E.
700 N.W. 107TH AVE.
MIAMI FL

2.3 STREET ADDRESS

TITLE ☐ DELETE

NAME
VT
SALEDA, M.E.
700 N.W. 107TH AVE.
MIAMI FL

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
AS
SANTAELLA, GRACE
700 NW 107TH AVE
MIAMI FL

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
AS
SANTAELLA, GRACE
700 NW 107TH AVE
MIAMI FL

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Grace Santaella

Grace Santaella 1-13-97 (305)229-6400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0232141

CR2E034 (9/96)