

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 20 PM 12:13

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # N07747 (1)

1. Corporation Name

BOND INVESTORS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/20/1985	3a. Date of Last Report 03/18/1994
4. FEI Number 59-2473723	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. 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. 199.002, Florida Statutes ☒ Yes ☐ No	

Principal Place of Business % RICHARD LEHMANN 6965 GLEN EAGLE DR MIAMI LAKES FL 33014	Mailing Address % RICHARD LEHMANN 6965 GLEN EAGLE DR MIAMI LAKES FL 33014
2. Principal Place of Business 21 6175 NW 153 ST #221	2a. Mailing Address 26
Suite, Apt. #, etc. 22 Miami Lakes FL	Suite, Apt. #, etc. 27
City & State 23 33014	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**LEHMANN, RICHARD
6965 GLEN EAGLE DR
MIAMI LAKES FL 33014**

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

FL

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☐ Change ☐ Addition
NAME	LEHMANN, RICHARD	1.2 NAME	
STREET ADDRESS	6965 GLEN EAGLE DR	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI LAKES FL	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	PLATT, DAVID	2.2 NAME	
STREET ADDRESS	13831 SW 59 ST.	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	WARD, DR. O. BYRON	3.2 NAME	
STREET ADDRESS	4 S MEDLEY DR.	3.3 STREET ADDRESS	
CITY - ST - ZIP	NEWTON SQ. PA	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	HOFFER, ARTHUR	4.2 NAME	
STREET ADDRESS	505 OLD WILLETT PATH	4.3 STREET ADDRESS	
CITY - ST - ZIP	HAUPPAUGE, NY.	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 110.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard Lehmann *Richard Lehmann*

4/15/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #