

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$395)

**NONPROFIT
CORPORATION
ANNUAL REPORT
1995**



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

FILED

95 JUL 19 AM 10:54

SECRETARY OF STATE
 TALLAHASSEE FLORIDA

DOCUMENT # N08646 (4)

1. Corporation Name

AMERICAN ASSOCIATION OF DISABLED PERSONS, CORP.

Principal Place of Business

Mailing Address

% HENRY J GOLDSTEIN
 7958 PINES BLVD., SUITE 280
 PEMBROKE PINES FL 33024

% HENRY J GOLDSTEIN
 7958 PINES BLVD., SUITE 280
 PEMBROKE PINES FL 33024

Note: Business card has new address.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/08/1985	3a. Date of Last Report 02/28/1994
4. FEI Number 59-2518127	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 ☒	FILING FEE IS \$61.25
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21 8362 Pines Blvd s.280 Suite, Apt. #, etc. 22 City & State 23 Zip 24 33024	2a. Mailing Address 26 Pembroke Pines FL Suite, Apt. #, etc. 27 City & State 28 Zip 29 33024	Country 25 U.S.A.	Country 30 U.S.A.
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GOLDSTEIN, HENRY J.
9042 NW 14TH CT
PEMPROKE PINES FL 33024-4601

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

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE **Henry J. Goldstein**

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent Signature required when reinstating)

July 13 1995

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE MD	NAME GOLDSTEIN, HENRY J.	11 TITLE ☐ Change ☐ Addition	
STREET ADDRESS 9042NW 14TH CT.		12 NAME	
CITY - ST - ZIP PEMBROKE PINES FL		13 STREET ADDRESS	
TITLE D	NAME GOLDSTEIN, DEBORAH	14 CITY - ST - ZIP	☐ Change ☐ Addition
STREET ADDRESS 750 NE 64 ST #B509		21 TITLE ☐ Change ☐ Addition	
CITY - ST - ZIP MIAMI FL		22 NAME	
TITLE D	NAME LUX, WALTER G.	23 STREET ADDRESS	
STREET ADDRESS 3001 N. 68TH AVE.		24 CITY - ST - ZIP	☐ Change ☐ Addition
CITY - ST - ZIP HOLLYWOOD FL		31 TITLE ☐ Change ☐ Addition	
		32 NAME	
		33 STREET ADDRESS	
		34 CITY - ST - ZIP	☐ Change ☐ Addition
		41 TITLE ☐ Change ☐ Addition	
		42 NAME	
		43 STREET ADDRESS	
		44 CITY - ST - ZIP	☐ Change ☐ Addition
		51 TITLE ☐ Change ☐ Addition	
		52 NAME	
		53 STREET ADDRESS	
		54 CITY - ST - ZIP	☐ Change ☐ Addition
		61 TITLE ☐ Change ☐ Addition	
		62 NAME	
		63 STREET ADDRESS	
		64 CITY - ST - ZIP	

CR2E037 (3/95)



**American Association
of
Disabled Persons Corp.**
 Advocates of the emotionally challenged
 Not-for-Profit Organization

Henry J. Goldstein R.A.
 Director of South Florida

8362 Pines Blvd., Suite 280, Pembroke Pines, FL 33024
 Phone 305-437-2954 Cellphone 305-562-0832 Fax 305-436-9990

I certify that the information in this 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

(Signature and typed or printed name of signing officer or director)

July 13 1995

(Date)

(Typed Name)

(305) 437 2954