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 19 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N09610 (9)

1. Corporation Name

DORCHESTER, ROXBURY, MATTAPAN ASSOCIATION INC. O F FLORIDA

Principal Place of Business	Mailing Address
13470 HIGH POINT WAY DELRAY BCH. FL 33445	13470 HIGH POINT WAY DELRAY BCH. FL 33445

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/04/1985
3a. Date of Last Report: 03/08/1994
4. FEI Number: 23-7168837 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

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. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WIENER, DAVID
13470 HIGH POINT WAY
DELRAY BCH. FL 33484

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 David E. Wiener — April 3, 1995
Signature, typed or printed name 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	D	1.1 TITLE	☒ Change ☐ Addition 1st V.P.
NAME	PHILLIP BRISS	1.2 NAME	PHILLIP BRISS
STREET ADDRESS	251 174TH STREET	1.3 STREET ADDRESS	251 174TH ST.
CITY-ST-ZIP	NORTH MIAMI BE	1.4 CITY-ST-ZIP	NORTH MIAMI FL
TITLE	P	2.1 TITLE	☒ Change ☐ Addition 2nd V.P.
NAME	EDWARD LEWE	2.2 NAME	EDWARD FELDBERG
STREET ADDRESS	20660 WENDALL TERRACE	2.3 STREET ADDRESS	10678 OCEAN PALM WAY
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	BOYNTON BEACH, FL.
TITLE	T	3.1 TITLE	☐ Change ☐ Addition
NAME	BLANK, MILTON	3.2 NAME	
STREET ADDRESS	1355 N.W. 21ST TERRACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL	3.4 CITY-ST-ZIP	
TITLE	VP	4.1 TITLE	☒ Change ☐ Addition P
NAME	SLAVET, SID	4.2 NAME	SLAVETT, SID
STREET ADDRESS	2815 SW 13 ST	4.3 STREET ADDRESS	2815 SW 13 ST
CITY-ST-ZIP	DELRAY BCH. FL	4.4 CITY-ST-ZIP	DELRAY BEACH, FL
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	DAVID E. WIENER	5.2 NAME	
STREET ADDRESS	13470 HIGH POINT WAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	COHEN, DAVID	6.2 NAME	
STREET ADDRESS	13778C VIA AURORA	6.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL	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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Milton Blank — 3/27/95 — 407-278-4901
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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