

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mathiam Secretary of State DIVISION OF CORPORATIONS
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APPROVED
AND
FILED
MAY -1 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N46949 (6) 1. Corporation Name: THE AMERICA CHARITABLE FUND, INC.
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Principal Office or Business Address: 9960 CENTRAL PK BLVD STE 300 BOCA RATON FL 33428 US	Mailing Address: 9960 CENTRAL PK BLVD STE 300 BOCA RATON FL 33428 US
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DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified 01/21/1992	3a. Date of Last Report 06/28/1994
4. FEI Number 65-0305847	Applied For ☐ Not Applicable

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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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: CORPORATION COMPANY OF MIAMI 1500 MIAMI CENTER 201 S BISCAYNE BLVD SUITE 1600 MIAMI FL 33131

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
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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 person named in 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100)

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	1. TEDIKIS, FRANK 2701 ROCKY POINT DR STE 700 TAMPA FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	2. TRAFELL, BEN 150 E PALMETTO PK RD BOCA RATON FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	3. PINIYRO, ROBERT M 9960 CENTRAL PRK BLVD STE 300 BOCA RATON FL 33428
TITLE NAME STREET ADDRESS CITY, ST, ZIP	4. OD EARRIG, KEN 9960 CENTRAL PK BLVD STE 300 BOCA RATON FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	5. BIENER, ROSLYN 4960 CENTRAL PARK BLVD SOUTH #300 BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY, ST, ZIP	6. SCHUMANN, DANIEL 4960 CENTRAL PARK BLVD SOUTH #300 BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY, ST, ZIP	7. TIDIKIS, FRANK 2701 ROCKY POINT DR STE 700 TAMPA FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	8. TROXELL, BEN 150 E PALMETTO PK RD BOCA RATON FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	9. PINIYRO, ROBERT M 9960 CENTRAL PRK BLVD STE 300 BOCA RATON FL 33428
TITLE NAME STREET ADDRESS CITY, ST, ZIP	10. OD EARRIG, KEN 9960 CENTRAL PK BLVD STE 300 BOCA RATON FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	11. BIENER, ROSLYN 4960 CENTRAL PARK BLVD SOUTH #300 BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY, ST, ZIP	12. SCHUMANN, DANIEL 4960 CENTRAL PARK BLVD SOUTH #300 BOCA RATON, FL 33428

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY, ST, ZIP	☒ Change ☐ Addition TIDIKIS, FRANK
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY, ST, ZIP	☒ Change ☐ Addition TROXELL, BEN
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY, ST, ZIP	☒ Change ☐ Addition PINIYRO, ROBERT M 9960 CENTRAL PARK BLVD SOUTH #300 BOCA RATON, FL 33428
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY, ST, ZIP	☐ Change ☒ Addition SCHUMANN, DANIEL 4960 CENTRAL PARK BLVD SOUTH #300 BOCA RATON, FL 33428
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY, ST, ZIP	☐ Change ☒ Addition BIENER, ROSLYN 4960 CENTRAL PARK BLVD SOUTH #300 BOCA RATON, FL 33428
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY, ST, ZIP	☐ Change ☐ Addition SCHUMANN, DANIEL 4960 CENTRAL PARK BLVD SOUTH #300 BOCA RATON, FL 33428

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)(k), Florida Statutes. I further certify that the information included 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. 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]* 4/26/95 467-4874618
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR