

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P19456 (3)

1. Corporation Name

FLORIDA STATE COUNCIL OF SENIOR CITIZENS EDUCATION & RESEARCH FUND, INC.

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -5 PM 3:10

Principal Place of Business

**6635 W COMMERCIAL BLVD
STE 115C
TAMARAC FL 33319
US**

Mailing Address

**117 C STREET, S.E.
WASHINGTON DC 20003**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/02/1988	3a. Date of Last Report 04/14/1994
4. FEI Number 58-1752092	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$0.75 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	

2. Principal Place of Business

21 4300 N. University Drive

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite B-206

27 Suite, Apt. #, etc.

**23 City & State
Lauderhill, Florida**

28 City & State

**24 Zip
33351**

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**COMERFORD GEORGE
5844 WESTERN WAY
LAKE WORTH FL 33463**

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LAPIDUS, PHYIDUS
STREET ADDRESS	2432 NW 63RD ST
CITY-ST-ZIP	BOCA RATON FL
TITLE	VD
NAME	MILLER, GENEVA
STREET ADDRESS	3750 NE 169TH ST., #404
CITY-ST-ZIP	MIAMI BEACH FL
TITLE	D
NAME	DUNTON, GEORGE
STREET ADDRESS	2103 SW 13TH PLACE
CITY-ST-ZIP	BOYNTON BCH. FL
TITLE	SD
NAME	ROBBINS, HELEN
STREET ADDRESS	2929 S.W. 3RD AVENUE
CITY-ST-ZIP	MIAMI FL
TITLE	TD
NAME	COMERFORD, GEORGE
STREET ADDRESS	5844 WESTERN WAY
CITY-ST-ZIP	LAKE WORTH FL
TITLE	D
NAME	BALE, GERALD
STREET ADDRESS	16091 BLATT BLVD., #112
CITY-ST-ZIP	FT LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	D	☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	VD	☒ Change ☐ Addition
3.2 NAME	LOU COLBY	
3.3 STREET ADDRESS	1018 Powersong Street	
3.4 CITY-ST-ZIP	Holiday, FL 34690	
4.1 TITLE		☒ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS	6814 SW 114th Place; #H	
4.4 CITY-ST-ZIP	Miami, FL 33173	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	PD	☒ 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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

3/23/95

305/572-3469

Date

Telephone Number