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Jan 22 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **704613** (9)

1. Corporation Name

THE THEOSOPHICAL SOCIETY IN MIAMI

Principal Place of Business

Mailing Address

831 SE 9TH ST
DEERFIELD BCH FL 33441
US

831 SE 9 ST
DEERFIELD BCH FL 33441
US



3. Date Incorporated or Qualified

09/27/1962

4. FEI Number

59-1002836

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALLEN FRANKS
4211 NE 12TH AVE.
POMPANO BCH FL 33064

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 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

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 **P** ☐ DELETE

NAME **FRANKS, CARY**
STREET ADDRESS **4211 NE 12TH AVENUE**
CITY-ST-ZIP **POMPANO BEACH FL**

TITLE **SD** ☐ DELETE

NAME **HURD, CAROL**
STREET ADDRESS **2261 EVERGLADES DRIVE**
CITY-ST-ZIP **MIRAMAR FL**

TITLE **VD** ☐ DELETE

NAME **MALKIN, KENNETH M.**
STREET ADDRESS **10300 SW 125 ST**
CITY-ST-ZIP **MIAMI FL**

TITLE **T** ☐ DELETE

NAME **FRANKS, ALLEN**
STREET ADDRESS **4211 NE 12TH AVE.**
CITY-ST-ZIP **POMPANO BCH FL**

TITLE **SD** ☐ DELETE

NAME **BEAUDRY, RALPH**
STREET ADDRESS **1430 SE BAYSHORE DR**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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:

Allen P. Franks **ALLEN P. FRANKS** JANUARY 8, 1998 954-941-4250

CR2E037 (10/97)