

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 27 PM 3:57

DOCUMENT # 746109 (8)

1. Corporation Name

THE SPIRITUAL ASSEMBLY OF THE BAHAI'S OF DEERFIELD BEACH, FLORIDA, INC.

Principal Place of Business

241 NW 43 WAY
DEERFIELD BEACH FL 33442

Mailing Address

241 NW 43 WAY
DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/01/1979

3a. Date of Last Report

06/30/1994

4. FEI Number

NOT APPLICABLE

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

☒

\$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

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

22

City & State

27

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

EIKEVIK, BJARNE
241 NW 43 WAY
DEERFIELD BEACH FL 33442

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 (if applicable, (NOTE: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

EIKEVIK, BJARNE

STREET ADDRESS

241 NW 43 WAY

CITY- ST- ZIP

DEERFIELD BCH FL

TITLE

D

NAME

DAWES, POLLY

STREET ADDRESS

3351 SW 3RD ST

CITY- ST- ZIP

DEERFIELD BCH FL

TITLE

VD

NAME

EVERTZ, DONNA

STREET ADDRESS

1193 SE 2ND TERRACE

CITY- ST- ZIP

DEERFIELD BCH FL

TITLE

TD

NAME

GUSTAFSON, OWEN

STREET ADDRESS

208 NW 48TH AVE

CITY- ST- ZIP

DEERFIELD BCH FL

TITLE

SD

NAME

SEIBERT, SANDRA

STREET ADDRESS

610 TRACE DR #102

CITY- ST- ZIP

DEERFIELD BCH FL

TITLE

SD

NAME

HAUCK, HELEN

STREET ADDRESS

241 NW 43 WAY

CITY- ST- ZIP

DEERFIELD FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

☐ 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Helen Hauck, Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Helen HAUCK

1-12-95 305 426 079

Date

Daytime (Area #)

0080308