FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

746109

(8)

THE SPIRITUAL ASSEMBLY OF THE BAHA'IS OF DEERFIE LD BEACH, FLORIDA, INC.

Principal Place of Business

Mailing Address

241 NW 43 WAY

241 NW 43 WAY

FILED May 20 1997 8:00am Secretary of State



OCCUPICATO DEN	10H FL 33442	OCEMPICED DENOTIFE 03442	3001		
				 Date Incorporated or Qualified 03/01/1979 	3a. Date of Last Report 03/19/1996
2. Principal Pl	lace of Business	2a. Mailing Address	me	4. FEI Number	Applied For
21 1/9 3	3 SE2 M Terr	26 1193 580	r Terr	ノ NOT APPLICABLE	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	4 11 170	City & State	2	6. Election Campaign Financing	\$5.00 May Be
	field Beach H	28 Sperfeel	Josep, H	Trust Fund Contribution	☐ Added to Fees
Zip V	Country USA	Zip	Country A	8. This corporation has liability for i	
24 334	25	29 3344/ 30	0 4 3//		Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name	Donna Evertz	Z
				ddress (P.O. Box Number is Not Accepted	le)
241 NW			10	93 SEDME TO	erer_
DEERFIE	LD BEACH FL 33442		83	•	
			84 City	enfield Besal	FL 85 70 308/
11. Pursuant t	to the provisions of Sections 617,0502	and 617.1508, Florida Statutes	the above-named o	corporation submits this statement for the p	urpose of changing its registered
office or re	egistereo agont, or both, in the State o m familiar with, and accom the Ablica	or ritorida. Such change was aut tions∡of, Section 617.0503. Florid	monized by the corp da Statutes.	oration's board of directors. I hereby accep	of the appointment as registered
SIGNATURE		1			5/12/97
SIGNATURE	Stanature, typed or printed runn of registered agen	it and title if applicable. (NOTE F	Registered Agent signature r	equired when reinstating)	DATE
12.	OFFICERS AND		18.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	EIKEVIK, BJARNE		1.2 NAME		
STREET ADDRESS	241 NW 43 WAY		1.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BCH FL		1.4 CITY+ST-ZIP		
TITLE	D	☐ DELETE	2. TITLE		Change Addition
NAME	DAWES, POLLY		2.2 NAME		
STREET ADDRESS	3351 SW 3RD ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BOH FL	······································	2. A CITY-ST-ZIP		
TITLE	VD	☐ DELETE	3. TITLE		☐ Change ☐ Addition
NAME	EVERTZ, DONNA		3.2 NAME		
STREET ADDRESS	1193 SE 2ND TERRACE		3.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BCH FL		3.4. CITY- ST- ZIP		
TITLE	TD	DELETE	4.† TITLE		Change Addition
NAME	GUSTAFSON, OWEN		4. 2 NAME		
STREET ADDRESS	208 NW 48TH AVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BCH FL		4.4 CITY - ST - ZIP		
TITLE	SD STITLE CANDEL	⋈ DELE1E	5.1 TITLE ムロ	Richard Evert	Change Addition
NAME	SEIBERT, SANDRA		5.2 NAME 37	1193 SE 2 M TeN	cace
STREET ADDRESS	610 TRACE DR #102		5.3 STREET ADDRESS	Richard Evert 1193 SE 2 M TW Deerfield Beach	RFL 33441
CITY-ST-ZIP	DEERFIELD BCH FL				
TITLE	SD	☐ DELETE	6. TITLE		☐ Change ☐ Addition
NAME	HAUCK, HELEN		6.2 NAME		
STREET ADDRESS	241 NW 43 WAY		6.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD FL		6.4 CITY-ST-ZIP		

I do 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 logal effect as if made under eath; that tam 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.

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