

FILE NOW: FILING FEE IS \$61.25

FILED
May 19 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 # **746109** (8)

1. Corporation Name

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



Principal Place of Business 1193 SE 2ND TERR DEERFIELD BEACH FL 33441 US	Mailing Address 1193 SE 2ND TERR DEERFIELD BEACH FL 33441 US
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3. Date Incorporated or Qualified 03/01/1979
4. FEI Number NOT APPLICABLE
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. 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 EVERTZ, DONNA 1193 SE 2ND TERR DEERFIELD BCH FL 33441	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 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME EIKEVIK, BJARNE	1.1 TITLE	☒ Change ☐ Addition
STREET ADDRESS 241 NW 43 WAY	CITY-ST-ZIP DEERFIELD BCH FL	1.2 NAME	
		1.3 STREET ADDRESS	
		1.4 CITY-ST-ZIP	
TITLE D	NAME DAWES, POLLY	2.1 TITLE	☒ Change ☐ Addition
STREET ADDRESS 3351 SW 3RD ST	CITY-ST-ZIP DEERFIELD BCH FL	2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
TITLE VD	NAME EVERTZ, DONNA	3.1 TITLE	☒ Change ☐ Addition
STREET ADDRESS 1193 SE 2ND TERRACE	CITY-ST-ZIP DEERFIELD BCH FL	3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
TITLE TD	NAME GUSTAFSON, OWEN	4.1 TITLE	☒ Change ☐ Addition
STREET ADDRESS 208 NW 48TH AVE	CITY-ST-ZIP DEERFIELD BCH FL	4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
TITLE SD	NAME EVERTZ, RICHARD	5.1 TITLE	☒ Change ☐ Addition
STREET ADDRESS 1193 SE 2ND TERRACE	CITY-ST-ZIP DEERFIELD BCH FL	5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
TITLE SD	NAME HAUCK, HELEN	6.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS 241 NW 43 WAY	CITY-ST-ZIP DEERFIELD FL	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: _____ 1/12/98 02L-41-8979

CR2E037 (10/97)