

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 09, 2005 8:00 am**  
**Secretary of State**

06-09-2005 90002 030 \*\*\*\*70.00

<b>DOCUMENT # 722486</b> 1. Entity Name <b>MARANATHA APARTMENTS, INC.</b>					
Principal Place of Business <b>11 S.W. 4TH AVENUE BOCA RATON, FL 33432</b>			Mailing Address <b>11 S.W. 4TH AVENUE BOCA RATON, FL 33432</b>		
2. Principal Place of Business <b>AS ABOVE</b>		3. Mailing Address <b>AS ABOVE</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		4. FEI Number <b>23-7415032</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>LAW, ISOBEL T 11 SW 4 AVE APT C 25 BOCA RATON, FL 33432</b>				7. Name and Address of New Registered Agent  <b>CHARLES HAVELKA 11 S.W. 4TH AVE 31-C BOCA RATON, FL 33432</b>	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE: <u><i>Charles Havelka</i></u> <b>CHARLES HAVELKA</b> <span style="float: right;">6-7-05</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>				Filing Fee is <b>\$61.25</b> <b>Due by September 7, 2005</b>	
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>				<b>\$5.00 May Be Added to Fees</b>	
Make check payable to <b>Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P <b>LOURDE, RICHARD E</b> <b>11 SW 4TH AVE APT B-15</b> <b>BOCA RATON, FL 33432</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P <b>FROST, DAN</b> <b>11 S.W. 4TH AVE APT A-1</b> <b>BOCA RATON, FL 33432</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD <b>WATKINS, PAULINE</b> <b>1. SW 4TH AVE, APT A-5</b> <b>BOCA RATON, FL 33432</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD <b>JEFFRIES, WILLIAM</b> <b>11 S.W. 4TH AVE 28-C</b> <b>BOCA RATON, FL 33432</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD <b>LAW, ISOBEL T</b> <b>11SW 4 AVE APT C25</b> <b>BOCA RATON, FL 33432</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD <b>HAVELKA, CHARLES</b> <b>11 SW 4TH AVE APT 31-C</b> <b>BOCA RATON, FL 33432</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	BD <b>MEYER, RALPH</b> <b>11, S.W. 4TH AVE, APT A-7</b> <b>BOCA RATON, FL</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	BD <b>WALSH, MICHAEL</b> <b>11 S.W. 4TH AVE 11-A</b> <b>BOCA RATON, FL 33432</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD <b>RICH, ARDYTHE</b> <b>11 SW 4TH AVE APT B14</b> <b>BOCA RATON, FL 33432</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD <b>BUTLER, ELEANOR</b> <b>11 S.W. 4TH AVE 17-B</b> <b>BOCA RATON, FL 33432</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Charles Havelka</i></u> <b>CHARLES HAVELKA</b>				6-7-05	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date Daytime Phone #</small>	

ATTACHMENT

H0087617

FLA DEPT OF STATE \*#722486 MAY 18, '05  
DIV OF CORPORATIONS

SIR OR MADAM,

WE HAVE NOT RECEIVED THE  
2005 UNIFORM BUSINESS REPORT,  
BECAUSE OF A CHANGE OF  
OFFICERS THE IMPORTANCE OF  
COMPLETING THIS FORM BY MAY 1<sup>ST</sup>  
2005 WAS NOT REALIZED,  
PLEASE INFORM ME OF OUR NEXT  
ACTION REQUIRED TO CORRECT THIS  
SITUATION.

*Charles Havelka*

CHARLES HAVELKA

MARANATHA APTS INC.

11 S.W. 4<sup>TH</sup> AVE

BOCA RATON, FL 33431

# ATTACHMENT

40087617

5/31/05 CORPORATE DETAIL RECORD SCREEN 11:36 AM  
NUM: 722486 ST:FL ACTIVE/FL NON-PROF FLD: 01/20/1972  
LAST: REINSTATEMENT FLD: 09/04/1985  
FEI#: 23-7415032  
NAME : MARANATHA APARTMENTS, INC.  
PRINCIPAL: 11 S.W. 4TH AVENUE CHANGED: 09/04/85  
ADDRESS BOCA RATON, FL 33432  
RA NAME : LAW, ISOBEL T NAME CHG: 04/09/02  
RA ADDR : 11 SW 4 AVE APT C 25 ADDR CHG: 04/09/02  
BOCA RATON, FL 33432  
ANN REP : (2002) A 04/09/02 (2003) A 01/09/03 (2004) A 02/06/04

1. MENU, 3. OFFICERS, 4. EVENTS, 5. NOTES, 7. LIST, 8. NEXT, 9. PREV

ENTER SELECTION AND CR: