		0
	A	· COF
┦	,	ANNU

FILE NOW: FILING FEE IS \$61.25

ONPROFIT RPORATION JAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortbam

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

730926

(3)

HOME OF THE HUNGARIAN BETHESDA BAPTIST CONVENTION OF NORTH AMERICA, INC.

Principal Place of Business

Mailing Address

FILED

97 JUN -2 AM 9:55

SECRETARY OF STATE TAILANASSEE, TLORIDA



% ernest kish 2800 Fordham RD Ne Palm Bay Florida 32905			2	% ERNEST KISH 2800 FORDHAM RD NE PALM BAY FLORIDA 32905-4312			9	. Date Incorporate	d or Qualified	3a D	ate of Last R	lenort			
<u>,</u>									10/16/197	4		04/25/19			
2. 1	Principal Piace of Business				2a. Mailing Address				4.	. FEI Number			Ap	oplied For	
21	ब्री				26					59-086513	32		No	ot Applicable	
Sulte, Apt. #, etc.			27	Suite, Apt. #, etc. 27				6.	. Cortificate of Stat	us Desired			Additional equired		
	City & State	е		28	City & State				6. Election Campaign Financing Trust Fund Contribution				\$5.00 May Be Added to Fees		
	(IP		Country		Zip	⊢ ¬	ountry	,		. This corporation I				. 199.032,	
24	• •	25 29 30							Florida Statutes Yes No						
	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent														
81								Name							
	KISH, E		AT ME				82	Street A	Address (P.O. Box Number is	s Not Acceptab	le)			
١.,		CYPHERS S				63									
AAALM BAY FL 32905															
	4	•					84	City				FL	85 Zip '	Code	
11.	Pursuant	to the provis	ions of Sections 61	7.0502 and	617.1508, Florida Stat	lutes, the	abov	e-named	corporation	on submits this stat	ement for the p	urpose c	of changing it	ts registered	
	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.														
eio			,		.,										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered							ent signature				DATE				
12.		-	OFFICER	S AND DIR	ECTORS DELETE	1:	<u> </u>	, 1	-#	ADDITIONS/CHAN	IGES TO OFFIC	ERS AN	D DIRECTOR Change	AS IN 12	
TITLE		TD	JED LOUIS		LJ DELETE		1 TITLE						TT Change	☐ WORRION	
NAME DRESCHER, LOUIS			CT .		1.2 NAME										
	STREET ADDRESS 2636 EAST 124TH STREET CLEVELAND, OH 0			C I	1.3 STREET ADI 1.4 CITY-ST-Z			- 1							
TITLE	-ST-ZIP	C	AND, OH V		DELETE		4 CHY-2 1 TITLE	51 - ZIP	_				Change	*ddition	
NAM		KX BIXMERX			XX	2.2 NAME			D VIC	H, ERNEST	r t			07	
	et address	204 20	NORESS SE			- 1		ADDRESS	119	SCYPHER	ru. PSTPN	Ti'			
l	-ST-ZIP	TATANG	PXXXXX			2.	4 CITY-	ST - ZIP		M BAY, FI					
TITLE		D	464646464646		XX DELETE	3.	1 TITLE		Ð				C hange	-Addition	
NAM	E	HALASI	X QXXQK K			3.	2 NAME		-	, BELA				· ·	
STRE	ET ADDRESS		XXXXXXXXXXX	k		3.3	3 STREET	ADDRESS		09 DEVOE					
CITY	- \$7 - ZIP	MXXXX	OPINE RAXX				4. CITY-	ST-ZIP		THGATE MI	[4819	5	- П.		
TITLI					☐ DELET E		1 TITLE		,			-	Change	☐ Addition	
NAM	_						2 NAME								
	ET ADDRESS							ADDRESS							
	-ST-ZIP				☐ DELETE		4 CITY - S 1 TITLE	ST-ZIP					Change	Addition	
TITLE					- Decrie		2 NAME				~ 11		101		
NAM	et address					1		ADDRESS			(X Z	-6	-91		
	-ST-ZIP					1	a SINEC 4 CITY- S				' 0				
TITLE					DELETE		4 0117-3 1 TITLE	31 - £IF					☐ Change	☐ Addition	
NAM						6.	2 NAME						-		
	ET ADDRESS					63	3 STREET	I ADDRESS	^	K Dept	1125				
	-ST-ZIP					6	4 CITY- S	ST - ZIP	بي	ok Dep"	61.2				

I do hereby certify that the information supplied with this filling 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 of an attachment with an address.