

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00APPROVED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NON-PROFIT CORPORATION ANNUAL REPORT REINSTATEMENT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 748511 1. Corporation Name Seacoast Sabbath Study Group, Inc.			
2. Principal Place of Business 5101 Collins Avenue Miami Beach, FL 33140		3a. Mailing Address 5101 Collins Avenue Miami Beach, FL 33140	
3. Date Incorporated or Qualified 08/13/79		3b. Date of Last Report 03/02/95	
4. FCI Number 59-2259226		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. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
8. Name and Address of Current Registered Agent Ida Kesselman 5825 Collins Avenue Miami Beach, FL 33140		10. Name and Address of New Registered Agent Jean Jacobson 5555 Collins Avenue Apt. 8V Miami Beach FL 33140	
11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 <i>Jean Jacobson</i>		DATE 08/18/97	
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1. TITLE PD ☐ DELETE 2. NAME Jack Mandel 3. STREET ADDRESS 5101 Collins Avenue 4. CITY-ST-ZIP Miami Beach, FL 33140		1.1 TITLE ASD ☒ Change ☐ Addition 1.2 NAME Jean JACOBSON 1.3 STREET ADDRESS 5555 Collins Avenue, #8V 1.4 CITY-ST-ZIP Miami Beach, FL 33140	
5. TITLE DS ☐ DELETE 6. NAME Regina Kaufman 7. STREET ADDRESS 5825 Collins Avenue 8. CITY-ST-ZIP Miami Beach, FL 33140		2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 300002273023--5 2.3 STREET ADDRESS -08/20/97--01123--005 2.4 CITY-ST-ZIP *****297.50 *****297.50	
9. TITLE ASD ☒ DELETE 10. NAME Ida Kesselman 11. STREET ADDRESS 5825 Collins Avenue 12. CITY-ST-ZIP Miami Beach, FL 33140		3.1 TITLE ☐ Change ☐ Addition 3.2 NAME 300002273023--5 3.3 STREET ADDRESS -08/20/97--01123--006 3.4 CITY-ST-ZIP *****8.75 *****8.75	
13. TITLE ID ☐ DELETE 14. NAME Herman Kaufman 15. STREET ADDRESS 5825 Collins Avenue 16. CITY-ST-ZIP Miami Beach, FL 33140		4.1 TITLE ☐ Change ☐ Addition 4.2 NAME REINSTATEMENT 4.3 STREET ADDRESS 96-97 4.4 CITY-ST-ZIP Q. Alan 4.5 CITY-ST-ZIP 8/20/97	
17. TITLE ☐ DELETE 18. NAME 19. STREET ADDRESS 20. CITY-ST-ZIP		5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: <i>Jean Jacobson, ASD</i>		DATE: 08/18/97 (305) 864-1633	

CP2E034 (9/96)