

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northen
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 22 AM 11:22

DOCUMENT # 754980 (1)

1. Corporation Name

BETH ZION, INC.

Principal Place of Business

**129 SPARROW DRIVE
ROYAL PALM BEACH FL 33411**

Mailing Address

**129 SPARROW DRIVE
ROYAL PALM BEACH FL 33411**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/04/1980

3a. Date of Last Report

06/21/1994

4. FEI Number

59-2093052

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)

☒

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

27

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**PAUL, RICHARD J.
1666 HOLLYWOOD RD
WELLINGTON FL 33414**

10. Name and Address of New Registered Agent

81 Name

Lee Berk

82 Street Address (P.O. Box Number is Not Acceptable)

12011 Palmetto Blvd #106

83

84 City

Royal Palm Beach

FL

85 Zip Code

33411

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Lee Berk

(Lee Berk)

1/25/95

(Signature, typed or printed name of registered agent and fee if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	COLLINS, VIOLA
STREET ADDRESS	131 MEADOWLARK DRIVE
CITY - ST - ZIP	ROYAL PALM BEACH FL
TITLE	VP
NAME	LAZARUS, LYNN
STREET ADDRESS	193 BILLAO STREET
CITY - ST - ZIP	ROYAL PALM BEACH FL
TITLE	VP
NAME	BARAODIN, RUTH
STREET ADDRESS	118 KINGFISHER WAY
CITY - ST - ZIP	ROYAL PALM BEACH FL
TITLE	S
NAME	RICKABAUGH, MICHELE
STREET ADDRESS	108 SEGOVIA AVENUE
CITY - ST - ZIP	ROYAL PALM BEACH FL
TITLE	T
NAME	KARSH, RAYMOND
STREET ADDRESS	12178 SYCAMORE LANE
CITY - ST - ZIP	WEST PALM BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	V.P. Lee Berk
5.3 STREET ADDRESS	12011 Palmetto Blvd #106
5.4 CITY - ST - ZIP	Royal Palm Beach FL 33411
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Lee Berk

Lee Berk

1/25/95

401.795.0220

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Telephone #