NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

F98000005366 DOCUMENT

1. Corporation Name

SPIRIT OF AMERICA RESEARCH FOUNDATION, INC.

Principal Place of Business P.O. BOX 952914 LAKE MARY FL 32795-2914

2. Principal Place of Business

21

Mailing Address

2a. Mailing Address

26

P.O. BOX 952914 LAKE MARY FL 32795-2914

FILED Aug 30, 1999 8:00 am Secretary of State

08-30-1999 90004 038 ****61.25

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3. Date incorporated or Qualifed

09/24/1998

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21		Cuita And Al and		4. FEI Number	Applied For
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		52-1334916	Not Applicable
22		27		02 1001010	\$8.75. Additional -
City & Sta	City & State City & State			5. Cartifcate of Status Desired	Fee Required
23		28			
Zip	Country	Zip _	Country	6. Election Campaign Financing	\$5.00 May Be
24	25	29 30	<u> </u>	Trust Fund Contribution	Added to Fees
	9. Name and Address of Current	t Registered Agent	81 Name	10. Name and Address of New Reg	pstered Agent
_				Enday R. BUTG	
SELIGMAN, PAUL				Address (R.O. Box Number is Not Acceptable	8)
1736 CF	Z., . Z. =		82 Street	DUBLIN DY	· · · · · · · · · · · · · · · · · · ·
LONGWOOD FL 32750					1
2000	00015 35130			MKM any	last Zin Codo
	•		84 City	0	FL 85 Zip Code 72 746
44 5		and 847 1609 Elegida Statutos	the above-named	composition submits this statement for the pu	
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.					
egent. I am familiar with (and accept the obligations of Section 617.0503, Florida Statutes.					
SIGNATURE 1849					
	Signature, typed or projed name of regulated agen			ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
12.	OFFICERS AN		13.	ADDITIONS/GITARGES TO GET IC	☐ Change ☐ Addition
TITLE	CP	☐ DELETE	1,1 TITLE	}	= , -
NAME	BUTLER, GORDON R		1.2 NAME		Signal Dadding
STREET ADDRESS	132 DUBLIN DRIVE	•	1.3 STREET ADDRESS		} <u>ឃ</u>
CITY-ST-ZIP	LAKE MARY FL 32746		1.4 CITY-ST-ZIP		
TITLE	VCT	DELETE	21 TITLE	KT .	Mg/Change ☐ Addition ☐
NAME	SELIGMAN, PAUL	i	2.2 NAME	Kerri Widner	, }
STREET ADORESS			2.3 STREET ADDRESS	4995 Chome or	' <u> </u>
1	SANFORD FL 32773 —		2.4 CITY-51-ZIP		0-12-
CITY-ST-ZIP	D D	☐ DELETE	3.1 TITLE	7.7.7.	Change Addition
TITLE	•		32 NAME		
NAME	BORCHARDT, RONALD		33 STREET ADDRESS		j
STREET ADDRESS					
CITY-ST-ZIP	LAKE MARY FL 32746	Operation	34. CITY-ST-ZIP		["] Change ☐ Addition
IIILE	D	☐ DELETE	4.1 TITLE		
NAME	MALLOW, JACK	!	4.2 NAME	İ	İ
STREET ADORESS	27951 GRATIOT AVE		4.3 STREET ADDRESS		1
CITY-ST-ZIP	ROSEVILLE MI 48066		4.4 CITY-ST-ZIP		- FALSE
TITLE	S	☐ DELETE	5.1 TITLE	1	☐ Change ☐ Addition
NAME	HANSON, J. DESHEA		5.2 NAME	1	-
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	DELTONA FL 32725		5.4 CITY-ST-ZIP		
TITLE	DELIGITATION OF TO	DELETE	6.1 TITLE		☐ Change ☐ Addition
,]	<u> </u>	6.2 NAME	1	}
NAME			6.3 STREET ADDRESS		1
STREET ADDRESS	- 3 2 3 A		E .		İ
CTTY-ST-ZIP :	13.4	1 4 4 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	64 CITY-ST-ZIP	4 - C- Non 410 07/2\/i) Elorida Chab dos 16	other cartify that the information
				d in Section 119.07(3)(i), Florida Statutes. I fur ature shall have the same legal effect as if m	
officer or	director of the comocation of the facet	ver or injeres empouvered to exe	CLIME THIS IMPOULL HIS	required by Chables of F. Fibrida Statutes, &	nd that my name appears in
Block 12 or Block 13 if changed, own an attachment with an address, with all other like empowered.					