

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**DOCUMENT # N25003**

**(7)**

1. Corporation Name

**REFUGE TEMPLE, INC.**

Principal Place of Business

**2708 N.W. 14 COURT  
FT. LAUDERDALE FL 33311**

Mailing Address

**2708 N.W. 14 COURT  
FT. LAUDERDALE FL 33311**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**02/24/1988**

3a. Date of Last Report

**03/24/1994**

4. FEI Number

**65-0170361**

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. Nonprofit with IRS 501(c)(3)  
Tax Exempt Status

☒

**\$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**

Suite, Apt. #, etc.

**22**

City & State

**23**

Zip

**24**

Country

2a. Mailing Address

**26**

Suite, Apt. #, etc.

**27**

City & State

**28**

Zip

**29**

Country

**30**

9. Name and Address of Current Registered Agent

**ELLISON, MATTIE  
2308 NW 13 CT  
2708 N.W. 14 COURT  
FT LAUDERDALE FL 33311**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
ELLISON, MATTIE  
2308 N.W. 13 COURT  
FT. LAUDERDALE FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
WIAH, LOUISE A.  
2550 N.W. 15 ST #2  
FT. LAUDERDALE FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
WHITFIELD, ROBERT  
2570 N.W. 15 ST  
FT. LAUDERDALE FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
COLLINS, LISA  
2550 N.W. 15 ST #1  
FT. LAUDERDALE FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
STEELE, ANGELA  
3851 NW 6 STREET  
FT LAUDERDALE FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
WHITFIELD, LOTTIE M  
2570 NW 15 STREET  
FT LAUDERDALE FL**

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  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

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 119.07(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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Louise A. Wiah* Secretary

**4/17/95**

**730-9609**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #