## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Aug 04 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N44080

(2)

## BIBLICAL ALTERNATIVES FELLOWSHIP, INC.

Principal Place of Business Mailing Address 4861 N. DIXIE HWY 4821 NW 15TH ST. OAKLAND PARK FL 33334 COCONUT CREEK FL 33063 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 3a. Date of Last Report 06/24/1991 01/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired 22 27 Fee Required City & State City & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip This corporation owes or has paid the current year Intangible 24 Yes Yes 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROWITT, STEVEN 82 Street Address (P.O. Box Number is Not Acceptable) 4821 NW 15TH ST. **COCONUT CREEK FL 33063** 83 84 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ DELETË Addition TITLE 1.1 TITLE Change ROWITT, STEVEN NAME 1.2 NAME 4821 NW 15TH ST. STREET ADDRESS 1.3 STREET ADDRESS COCONUT CREEK FL CITY-ST-ZIF 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE ☐ Change ☐ Addition CHAPMAN, WILLIAM NAME 2.2 NAME 7365 NW 15TH ST. STREET ADDRESS 2.3 STREET ADDRESS PLANTATION FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETÉ TITLE ☐ Change Addition 3.1 TITLE WEINER, LAWRENCE NAME 3.2 NAME 6410 SW 136TH AVE STREET ADDRESS 3.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change \_\_\_ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE Addition 5.1 TITLE Channe NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ☐ Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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.

6.4 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