FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 21 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

N44080

(2)

BIBLICAL ALTERNATIVES FELLOWSHIP, INC.

								A B
Principal Place of Business Mailing Address						5 (MILLIO) A) MIRTI BIGIT BEIGH INTH NOTE DIGHT R	DII DIBIS DID	11 8 1011 01011 1001
4861 N. DIXIE I	- WY	4821 NW 15TH ST.				3. Date Incorporated or Qualified		
OAKLAND PARK FL 33334		COCONUT CREEK FL 33063			06/24/1991			
US		US				4. FEI Number		Applied For
						NOT APPLICABLE		Not Applicable
Principal Place of Business 1		2a. Mailing Address 26	26			5. Certificate of Status Desired	+	5 Additional Required
Suite, Apt.	#, etc.	Suîte, Apt. #, etc.	Suîte, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be			
City & Stat		City & State				Trust Fund Contribution		
23	e	28	1 1			7- Is this nonprofit corporation a homeowners association?		
Zip	Country	Zip Country				8. This corporation owes or has paid the current year Intangible		
24	25	29	30			Personal Property Tax due June 30.	Yes	☐ No
	Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
			8	1 N	lame			
ROWITT, STEVEN 4821 NW 15TH ST.			82	2 S	treet Addres	ess (P.O. Box Number is Not Acceptable)		
	JT CREEK FL 33063		8:	3				
			84	4 C	City	FI	85 Z	Zip Code
11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the a					amed corpo		of changin	ig its registered
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-name office or registered agent, or both, in the State of Florida. Such change was authorized by the coagent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						n's board of directors. I hereby accept the ap	pointment	as registered
SIGNATURE		WITT PRESS	Cner	 1 /*	-450	Altone PARTOR 1/	-19F	ン
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg				gent sig	gnature required	when reinstating) DA/E		
12.	·-···	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECT	
TITLE	D DOWNER OFFICEN	DELETE	1.1 TITLE				LL Cilaii	åe □ vaanon
NAME OTRET LEBESSE	ROWITT, STEVEN 4821 NW 15TH ST.		1.2 NAME 1.3 STREE		NDTCC			
STREET ADDRESS	COCONUT CREEK FL		1.4 CITY-					
CITY-ST-ZIP TITLE	D	DELETE	2.1 TITLE				Chan	ge
NAME	CHAPMAN, WILLIAM		2.2 NAM		İ			
STREET ADDRESS	7365 NW 15TH ST.		2.3 STREE		RESS			
CITY-ST-ZIP			2. 4 CITY	- ST - ZI	JP .			
TITLE			3.1 TITLE			• • •	Chang	ge 🔲 Addition
NAME	WEINER, LAWRENCE		3.2 NAME	Ē				
STREET ADDRESS	6410 SW 136TH AVE		3.3 STREE	ET ADD	RESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4. CITY-		IP.			1
TITLE		☐ DELETE	4.1 TITLE				Chang	ge L. Addition
NAME			4. 2 NAMI	-				:
STREET ADDRESS			4.3 STREE					İ
CITY-ST-ZIP		DELETE	4.4 CITY- 5.1 TITLE		?		Chang	ge Addition
TITLE NAME		occur.	5.2 NAME					, , , , , , , , , , , , , , , , , , , ,
STREET ADDRESS			5,3 STREE		iRESS	•		
			5.4 CITY-					
CITY-ST-ZIP TITLE	· · · ·	DELETE	6.1 TITLE				Chang	ge Addition
NAME			6.2 NAME				Ì	
STREET ADDRESS			6.3 STREE		RESS			
			1		1			

14. I 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

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