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Aug 07 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # N94000000025 (6)

1. Corporation Name

COMMUNITY INTERFAITH COALITION, INC.

Principal Place of Business

5961 NW 2ND AVE  
#209  
BOCA RATON FL 33487  
US

Mailing Address

5961 NW 2ND AVE  
#209  
BOCA RATON FL 33487-3062  
US

2. Principal Place of Business

21 6152 Verde Trail No

Suite, Apt. #, etc.

22 B

23 Boca Raton FL

24 33484

25 US

2a. Mailing Address

26 6152 Verde Trail No

Suite, Apt. #, etc.

27

28 Boca Raton FL

29 33484

30 US

3. Date Incorporated or Qualified  
01/04/1994

3a. Date of Last Report  
02/26/1996

4. FEI Number  
65-0633915

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

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SILVER, BARRY  
7777 GLADES RD.  
BOCA RATON FL 33434

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 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)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☒ DELETE

NAME SILVERBERG, SYLVIA  
STREET ADDRESS 5961 NW 2ND AVE, #209  
CITY-ST-ZIP BOCA RATON FL

TITLE DV ☒ DELETE

NAME SPENCER, RICHARD  
STREET ADDRESS 6152 VERDE TRAIL NO.  
CITY-ST-ZIP BOCA RATON FL

TITLE DS ☒ DELETE

NAME BERNARD, MARTHA  
STREET ADDRESS 6394 LA SALLE DRIVE  
CITY-ST-ZIP DELRAY BEACH FL 33484

TITLE DT ☐ DELETE

NAME BERNARD, WILLIAM  
STREET ADDRESS 6394 LASALLE DR  
CITY-ST-ZIP DELRAY BCH FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME Spencer Richard  
1.3 STREET ADDRESS 6152 Verde Trail No.  
1.4 CITY-ST-ZIP Boca Raton FL 33433

2.1 TITLE DV ☒ Change ☐ Addition

2.2 NAME Bernard Martha  
2.3 STREET ADDRESS 6394 Lasalle Drive  
2.4 CITY-ST-ZIP Delray Beach FL 33484

3.1 TITLE DS ☒ Change ☐ Addition

3.2 NAME Lee, charlene  
3.3 STREET ADDRESS 840 SW 3rd St  
3.4 CITY-ST-ZIP Boca Raton FL 33486

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 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.

CR2E037 (9/96)