

FILE NOW: FILING FEE IS \$61.25

FILED
Sep 02 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N95000001247 (4)

1. Corporation Name

FAITH HOUSE INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

9858 GLADES ROAD SUITE 134
BOCA RATON FL 33434

9858 GLADES ROAD SUITE 134
BOCA RATON FL 33434

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

JONES, MARYELLEN B
22511 SW 66 AVE APT B-111
BOCA RATON FL 33428

3. Date Incorporated or Qualified

03/14/1995

4. FEI Number

65-0564154

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. Is this nonprofit corporation a homeowners association?

☐

Yes

☐

No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

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 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 D
NAME BURTON, KATHLEEN S.
STREET ADDRESS 3840 JOHNSON AVE.
CITY-ST-ZIP RIVERDALE NY 10463

TITLE D
NAME ALLEN, ALICE
STREET ADDRESS 2280 PINEAPPLE PLACE
CITY-ST-ZIP MERRITT ISLAND FL 32952

TITLE D
NAME JONES, JOHN F.
STREET ADDRESS 22511 SW 66TH AVE.
CITY-ST-ZIP BOCA RATON FL 33428

TITLE T
NAME TUCHMAN, ROBERTO
STREET ADDRESS 10167 NW 31ST STREET
CITY-ST-ZIP CORAL SPRINGS FL

TITLE T
NAME JONES, MARYELLEN
STREET ADDRESS 22511 SW 66TH AVE.
CITY-ST-ZIP BOCA RATON FL

TITLE D
NAME WASSERMAN, TED
STREET ADDRESS 21301 POWERLINE RD.
CITY-ST-ZIP BOCA RATON 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 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:

Maryellen B. Jones

CR2E037 (10/97)