

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 13, 1999 8:00 am
Secretary of State

04-13-1999 90007 034 ****61.25

DOCUMENT # N98 000000 191V

1. Corporation Name

CHURCH OF THE INFINITE PRESENCE, INC.

Principal Place of Business

FORT LAUDERDALE, FL

Mailing Address

100 SE 12TH STREET
FORT LAUDERDALE, FL
33316

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

3. Date Incorporated or Qualified

01/12/98

4. FEI Number

☒ Applied For
☐ Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ELWOOD M. OBRIG
100 SE 12TH STREET
FORT LAUDERDALE, FL 33316

81 Name

ROBERT L. BOHEMIER

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

100 SE 12TH STREET

83

84 City

FORT LAUDERDALE

FL

85 Zip Code

33316

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 ROBERT L. BOHEMIER DIRECTOR

Robert L. Bohemier 3/28/99

Signature, typed or printed name of registered agent and title (Applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME OBRIG, ELWOOD M
STREET ADDRESS 100 SE 12TH STREET
CITY-ST-ZIP FORT LAUDERDALE, FL 33316

1.1 TITLE D, P ☐ Change ☒ Addition
1.2 NAME BARCLAY, CORVETTE M.
1.3 STREET ADDRESS 540 E. TROPICAL WAY
1.4 CITY-ST-ZIP PLANTATION, FL 33317

TITLE D ☒ DELETE
NAME MURRAY, RONALD
STREET ADDRESS 4201 N. FEDERAL HWY
CITY-ST-ZIP POMPANO BEACH, FL 33064

2.1 TITLE VP, D ☐ Change ☒ Addition
2.2 NAME ROSENBERG, STEVEN A.
2.3 STREET ADDRESS 10370 NW 17TH COURT
2.4 CITY-ST-ZIP PLANTATION, FL 33322

TITLE D ☐ DELETE
NAME SMITH, MICHAEL B
STREET ADDRESS 1919 NE 33RD STREET
CITY-ST-ZIP FORT LAUDERDALE, FL 33308

3.1 TITLE D ☒ Change ☐ Addition
3.2 NAME SMITH, MICHAEL B
3.3 STREET ADDRESS 16207 ERLE PLACE
3.4 CITY-ST-ZIP DAVIE, FLORIDA 33331

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE T, D ☐ Change ☒ Addition
4.2 NAME CUSHMAN, CAROLYN
4.3 STREET ADDRESS 3120 NW 88TH AVE APT 307
4.4 CITY-ST-ZIP SUNRISE, FL 33351

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE D ☐ Change ☒ Addition
5.2 NAME BROWN, JOHN D
5.3 STREET ADDRESS 1221 SW 17TH STREET
5.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33315

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE D ☐ Change ☒ Addition
6.2 NAME BOHEMIER, ROBERT L.
6.3 STREET ADDRESS 173 NE 19TH STREET
6.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33305

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, with all other like empowered.

SIGNATURE:

Robert L. Bohemier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/99
Date

954-527-9200
Daytime Phone #

CR2E037 (11/98)