

**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**Feb 04 1998 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P10458 (8)**  
 1. Corporation Name  
**BURNHAM MINISTRIES INTERNATIONAL, INC.**



Principal Place of Business 2082 NW 19 WAY BOCA RATON FL 33431	Mailing Address 2082 NW 19 WAY BOCA RATON FL 33431
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3. Date Incorporated or Qualified <b>06/17/1986</b>	Applied For Not Applicable
4. FEI Number <b>34-6562555</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
	Country 30

**9. Name and Address of Current Registered Agent**

**BURNHAM, DAVID L.**  
**2082 N.W. 19TH WAY**  
**BOCA RATON FL 33431**

**10. Name and Address of New Registered Agent**

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>
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 \_\_\_\_\_ DATE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>BURNHAM, JONATHAN</b> <b>3296 MIZZEN MAST.</b> <b>MAINEVILLE OH</b>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CARKHUFF WALDO</b> <b>587 RIDGE RD</b> <b>WATCHUNG NJ</b>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>RYBKA, LAWRENCE</b> <b>2296 GOLF BROOK DRIVE</b> <b>WELLINGTON FL</b>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SIEGENTHALER, HAROLD</b> <b>1214 OAK KNOLL DR</b> <b>AKRON OH</b>	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>BURNHAM DAVID</b> <b>2082 NW 19TH WAY</b> <b>BOCA RATON FL</b>	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST</b> <b>BURNHAM, SUE</b> <b>2082 NW 19TH WAY</b> <b>BOCA RATON FL</b>	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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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:** DAVID L. BURNHAM 1/08/98 561-997 9878

CR2E037 (10/97)