

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737901

FILED  
Jan 23, 2006  
Secretary of State

**Entity Name:** SPIRITUAL ASSEMBLY OF THE BAHAI'S OF CENTRAL DADE COUNTY, INC.

**Current Principal Place of Business:**

6624 (B) SW 114 PL  
MIAMI, FL 33173 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 165231  
MIAMI, FL 33116 US

**New Mailing Address:**

**FEI Number:** 65-0196354

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHEFFEY, FRANK  
6624 (B) SW 114TH PL  
MIAMI, FL 33173 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: PICARRETO, PAULETTE  
Address: 10800 SW 126 AVE  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete  
Name: PICCARRETO, ALDO  
Address: 10800 SW 126 AVE  
City-St-Zip: MIAMI, FL 33186

Title: TD ( ) Delete  
Name: SHEFFEY, FRANK  
Address: 6624 B SW 114TH PL  
City-St-Zip: MIAMI, FL 33173

Title: D ( ) Delete  
Name: FORES, DALE R  
Address: 14760 SW 77 ST  
City-St-Zip: MIAMI, FL 33193

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK SHEFFEY

TD

01/23/2006

Electronic Signature of Signing Officer or Director

Date