

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004734

FILED  
Mar 24, 2008  
Secretary of State

**Entity Name:** SPIRITUAL ASSEMBLY OF THE BAHAI'S OF WESTON, FL, INC.

**Current Principal Place of Business:**

771 RANCH ROAD  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 266293  
WESTON, FL 33326 US

**New Mailing Address:**

**FEI Number:** 65-0934293

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PRITCHARD, CALVIN  
771 RANCH ROAD  
WESTON, FL 33326 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: SEC ( ) Delete  
Name: RAHMANI, SHEREEN  
Address: 4010 TURQUOISE TRAIL  
City-St-Zip: WESTON, FL 33331 US

Title: VCHM ( ) Delete  
Name: RAHMANI, MISSAGH  
Address: 4010 TURQUOISE TRAIL  
City-St-Zip: WESTON, FL 33331 US

Title: SEC ( ) Delete  
Name: FRANCISCO, ARINCI  
Address: 1060 BRIAR RIDGE ROAD  
City-St-Zip: WESTON, FL 33327 US

Title: CHM ( ) Delete  
Name: ESHRAGHI, ADRIEN DR.  
Address: 2934 OAKBROOK DRIVE  
City-St-Zip: WESTON, FL 33332 US

Title: MEM ( ) Delete  
Name: ESHRAGHI, SHERRY  
Address: 2934 OAKBROOK DRIVE  
City-St-Zip: WESTON, FL 33332 US

Title: T ( ) Delete  
Name: FAEGH, ASBAGHI  
Address: 199 ALHAMBRA WAY  
City-St-Zip: WESTON, FL 33326 US

**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:

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 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: FAEGH ASBAGHI

T

03/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date