

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005500

FILED
Jan 19, 2007
Secretary of State

Entity Name: MAGDALENE CARNEY BAHAI INSTITUTE, INC.

Current Principal Place of Business:

6002 SUMMIT BLVD
WEST PALM BEACH, FL 33415

New Principal Place of Business:

Current Mailing Address:

6002 SUMMIT BLVD
WEST PALM BEACH, FL 33415

New Mailing Address:

7369 WESTPORT PLACE
WEST PALM BEACH, FL 33413

FEI Number: 65-0987442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNWELL, CHARLES C
7369 WESTPORT PLACE
WEST PALM BEACH, FL 33413 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: D () Delete
Name: CORNWELL, CHARLES C
Address: 7369 WESTPORT PLACE
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D (X) Delete
Name: BAUMAN, RICHARD
Address: 11959 SURFBIRD CIRCLE
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: GUCHANI-ROSENBERG, FARAH
Address: 4481 CAMROSE LANE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Delete
Name: BROWNSTEIN, TED
Address: 720 SNOWDEN DRIVE
City-St-Zip: LAKE WORTH, FL 33461

Title: D () Delete
Name: JEFFORDS, CARLA
Address: 409 SW 15TH TERRACE
City-St-Zip: CAPE CORAL, FL 33991

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: D (X) Change () Addition
Name: JEFFORDS, CARLA
Address: 1467 VILLA JUNO DRIVE N.
City-St-Zip: JUNO BEACH, FL 33403

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: CHARLES C. CORNWELL

D

01/19/2007

Electronic Signature of Signing Officer or Director

Date