

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N25317 (1)

1. Corporation Name

THE SPIRITUAL ASSEMBLY OF THE BAHAI'S OF PALM BEACH COUNTY CENTRAL, INC.

Principal Place of Business

5835 DRYDEN RD
P.O. BOX 5354
WEST PALM BCH FL 33466

Mailing Address

5835 DRYDEN RD
P.O. BOX 5354
WEST PALM BCH FL 33466

APPROVED
AND
FILED

95 MAY -1 PM 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900001520159
-06/22/95--01013--022
*****51.25 *****61.25

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/10/1988

3a. Date of Last Report
04/21/1994

4. FEI Number
36-2170876

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes ☐ No ☒

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

BECKMON, JAMES EARL
5835 DRYDEN RD
WEST PALM BEACH FL 33415

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

James Earl Beckmon

(NOTE: Registered Agent signature required when reappointing)

5-1-95

DATE

12. OFFICERS AND DIRECTORS

TITLE DVC
NAME MONAWAR, STEEL
STREET ADDRESS 9935 PINEAPPLE TREE DR #208
CITY - ST - ZIP BOYNTON BEACH FL 33436

TITLE TD
NAME BECKMAN, JAMES EARL
STREET ADDRESS 5835 DRYDEN ROAD
CITY - ST - ZIP WEST PALM BEACH FL

TITLE SD
NAME OLIVER, GINA
STREET ADDRESS 1910 SANDRA LANE
CITY - ST - ZIP WEST PALM BEACH FL

TITLE CD
NAME ROHANI, SAMAN
STREET ADDRESS 951 ARLINGTON DR.
CITY - ST - ZIP WEST PALM BEACH FL

TITLE D
NAME AMAICA, FEQUIERE
STREET ADDRESS 5233 CAMMOMWAY
CITY - ST - ZIP W. PALM BCH FL 33415

TITLE D
NAME STEPHEN, SCHNEIDER
STREET ADDRESS 5793 E. ELLIS HOLLOW RD
CITY - ST - ZIP LAKE WORTH FL FL 33415

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE DVC
12 NAME Rohani, Elizabeth
13 STREET ADDRESS 951 ARLINGTON DR.
14 CITY - ST - ZIP West Palm Beach, FL. 33415

21 TITLE TD
22 NAME Beckmon, James E.
23 STREET ADDRESS 5835 Dryden Road
24 CITY - ST - ZIP West Palm Beach, VA. 33415

31 TITLE SD
32 NAME Massey Paige
33 STREET ADDRESS 4114 Selberg Ln
34 CITY - ST - ZIP Lake Worth FL 33461

41 TITLE D
42 NAME Rohani, Saman
43 STREET ADDRESS 951 Arlington Dr
44 CITY - ST - ZIP West Palm Bch FL

51 TITLE D
52 NAME Fequiere, Anicea
53 STREET ADDRESS 5233 Cannon Way
54 CITY - ST - ZIP West Palm Beach, FL 33415

61 TITLE CD
62 NAME Massey William
63 STREET ADDRESS 4114 Selberg Ln
64 CITY - ST - ZIP LAKE WORTH FL. 33461

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

Saman Rahani

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95

Date

407)684-4039

Telephone Number