2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004467

Entity Name: SPIRITUAL ASSEMBLY OF THE BAHA'IS OF MARION COUNTY,

FLORIDA, INC.

Current Principal Place of Business:

9920 SE 174 PL RD SUMMERFIELD, FL 34491

Current Mailing Address:

PO BOX 770835

OCALA, FL 34477 US

FEI Number: 59-2995925 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUTCHENS, JOAN C 9920 SE 174 PL RD SUMMERFIELD, FL 34491 US

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

FILED Apr 24, 2013

Secretary of State

CC0934475576

Officer/Director Detail:

Title Title D

Name STEPP, DEBORAH Name HUTCHENS, ERIC C Address 595 FAIRWAYS CIRCLE #A Address 9920 SE 174 PL RD

City-State-Zip: OCALA FL 34472 City-State-Zip: SUMMERFIELD FL 34491

Title Title D

Name ROMAS, JOSEFINA Name HIRONO, YOSUKE Address 1125 SW 123RD PLACE Address 80 SE 61ST CT City-State-Zip: OCALA FL 34472 City-State-Zip: OCALA FL 34473

Title Title D

Name ROBLES, GISELA Name GRIFFIN, BARBARA Address 1125 SW 123RD PLACE 8680 SW 94 LN UNIT E Address

City-State-Zip: OCALA FL 34473 City-State-Zip: OCALA FL 34481

DIRECTOR Title Title **DIRECTOR**

Name REECE-HAMBLIN, ALMA Name LETBETTER, DON Address 16895 SE SUNNYBROOK CIR Address 80 SE 61ST CT THE VILLAGES FL 32162 City-State-Zip: OCALA FL 34472 City-State-Zip:

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: JOAN C HUTCHENS

CORRESPONDING **SECRETARY**

04/24/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title CORRESPONDING SECRETARY

Name HUTCHENS, JOAN C Address 9920 SE 174 PL RD

City-State-Zip: SUMMERFIELD FL 34491