

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2001 8:00 am
Secretary of State

09-10-2001 90053 011 ****61.25

DOCUMENT # 725433

1. Entity Name

SPIRITUAL ASSEMBLY OF THE BAHAI'S OF JACKSONVILL

Principal Place of Business

2140 ST. JOHNS BLUFF ROAD S.
 JACKSONVILLE FL 32246
 US

Mailing Address

2140 ST. JOHNS BLUFF ROAD S.
 JACKSONVILLE FL 32246
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

05-7990046

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

VENUS, NAHID
 824 WATERMAN RD., S.
 JACKSONVILLE FL 32207

7. Name and Address of New Registered Agent

Name **Sherry CZERNIESEWSKI**

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

3830 UNIVERSITY BLVD. S. #107

City

JACKSONVILLE

FL

Zip Code

32216

8. 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

Sherry Czerniejewski, Sherry Czerniejewski, Secretary 9/5/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
 After September 12, 2001, min. will be \$236.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE **CD** ☒ Delete
 NAME **BAUMAN, RICHARD**
 STREET ADDRESS **3746 PINCKNEY ISLAND CT**
 CITY-ST-ZIP **JACKSONVILLE FL 32224**

TITLE **SD** ☐ Delete
 NAME **CZERNIEJEWSKI, SHERRY**
 STREET ADDRESS **3830 UNIVERSITY BLVD S #107**
 CITY-ST-ZIP **JACKSONVILLE FL 32216**

TITLE **VD** ☐ Delete
 NAME **FERGUSON, VICENTEE**
 STREET ADDRESS **528 LAZY MEADOW DR E**
 CITY-ST-ZIP **JACKSONVILLE FL 32225**

TITLE **TD** ☒ Delete
 NAME **VENUS, NAHID**
 STREET ADDRESS **824 WATERMAN RD S**
 CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE **D** ☐ Delete
 NAME **VENUS, BAHMAN**
 STREET ADDRESS **824 WATERMAN RD S**
 CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE **D** ☒ Delete
 NAME **DUMBLETON, DUANE**
 STREET ADDRESS **1625 GERALDINE DR**
 CITY-ST-ZIP **JACKSONVILLE FL 32205**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
 NAME **TABBERI, FARHAD**
 STREET ADDRESS **5565 JEREMY LANE**
 CITY-ST-ZIP **JACKSONVILLE FL 32257**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **TD** ☒ Change ☒ Addition
 NAME **SCHUSTER, KAREN**
 STREET ADDRESS **13874 KETCH COVE DR**
 CITY-ST-ZIP **JACKSONVILLE FL 32224**

TITLE **CD** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
 NAME **LARBI, EDWARD**
 STREET ADDRESS **5442 CRESTA WAY**
 CITY-ST-ZIP **JACKSONVILLE FL 32211**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sherry Czerniejewski

9/5/01 904-646-9813

CR2E037 (5/01)