## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 725433**

FILED Apr 06, 2009 Secretary of State

Entity Name: SPIRITUAL ASSEMBLY OF THE BAHA'IS OF JACKSONVILLE, INC.

Current Principal Place of Business: New Principal Place of Business:

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

Current Mailing Address: New Mailing Address:

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

FEI Number: 05-7990046 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JONES, CARLA D
974 PARKRIDGE CIRCLE, WEST
JACKSONVILLE, FL 32211 US
SCHUSTER, KAREN A DR.
1348 EDGEWOOD AVE. S.
JACKSONVILLE, FL 32205 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: KAREN A SCHUSTER 04/06/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T ( ) Delete Title: DR (X) Change ( ) Addition

 Name:
 ASHCHI, NADER
 Name:
 EDWARD, LARBI

 Address:
 2140 ST. JOHNS BLUFF ROAD S.
 Address:
 5442 CRESTA WAY

 City-St-Zip:
 JACKSONVILLE, FL 32246
 City-St-Zip:
 JACKSONVILLE, FL 32211

Name: JONES, CARLA D Name: NADJI, BAHIEH

Address: 974 PARKRIDGE CIRCLE, WEST Address: 12967 SPICEBERRY DR.
City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: JACKSONVILLE, FL 32246

Title: D ( ) Delete Title: MRS (X) Change ( ) Addition

 Name:
 LARBI, EDWARD
 Name:
 LARBI, GLADYS

 Address:
 5442 CRESTA WAY
 Address:
 5442 CRESTA WAY

 City-St-Zip:
 JACKSONVILLE, FL 32211
 City-St-Zip:
 JACKSONVILLE, FL 32211

Title: D ( ) Delete Title: MR (X) Change ( ) Addition

Name: KABALI, MASEMBE Name: KABALI, MASEMBE Address: 464 BROCKHAM DR. Address: 464 BROCKHAM DR.

Address: 464 BROCKHAM DR. Address: 464 BROCKHAM DR.

City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: JACKSONVILLE, FL 32221

Title: CD () Delete Title: MRS (X) Change () Addition Name: SCHUSTER, KAREN Name: KABALI, TRACEY

Address: 1348 EDGEWOOD AVE S Address: 464 BROCKHAM DR.
City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32221

Title: D () Delete Title: DR (X) Change () Addition
Name: NADJI, BAHIEH Name: NADJI, HALEH

Address: 12967 SPICEBERRY DR. Address: 574 QUEEENS HARBOR BLVD City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32225

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: KAREN A SCHUSTER DR 04/06/2009

Electronic Signature of Signing Officer or Director

Date