FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # 737901 (9)

1. Corporation Name

SPIRITUAL ASSEMBLY OF THE BAHA'IS OF CENTRAL DAD E COUNTY, INC.

Principal Place of Business	Mailing Address
P O BOX 560554 P.O. BOX 560554 MIAMI FL 33256-554 US	P O BOX 560554 P.O. BOX 560554 MIAMI FL 33256-0554 US

3. Date Incorporated or Qualified: 01/31/1977

3a. Date of Last Report: 05/16/1995

2. Principal Place of Business
21: 9300 South Dixie Highway
22 Suite, Apt. #, etc.: 209
23 City & State: Miami, FL
24 Zip: 33156
25 Country: USA

2a. Mailing Address
26: P.O. Box 560554
27 Suite, Apt. #, etc.: P.O. Box 560554
28 City & State: Miami FL
29 Zip: 33256-0554
30 Country: USA

4. FEI Number: 65-0196354 ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**

MOO, ANDREW T.
11955 SW 66TH AVE.
MIAMI, FL
33156

10. **Name and Address of New Registered Agent**

81 Name: LINDA LEE HOWELL
82 Street Address (P.O. Box Number is Not Acceptable): 7975 SW 86th Street, #206
83
84 City: Miami FL 85 Zip Code: 33143

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: Linda Lee Howell — April 24, 1996 (DATE)
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD ROTH, MARION 8610 SW 20TH ST MIAMI FL	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	Chairman (CD) Roth, Martin 8610 SW 20th St Miami FL 33155	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MOO, ANDREW T. 11955 SW 66TH AVE. MIAMI, FL 00000	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	Vice Chairman (V) Lee Brocius (MS) 7722 Camino Real E 303 Miami FL 33143	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD VOJDANI, BIJAN 10560 SW 129TH CT MIAMI FL	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	Secretary (SD) Lee Howell (MS) 7975 SW 86th Street, #206 Miami, FL 33143	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD KALLAY, PETER 14115 SW 66TH ST I-8 MIAMI FL	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	Treasurer (TD) Peter Kallay 14115 SW 66 Street, I-8 Miami, FL 33183	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BROCIUS, LEE 7722 CAMINO REAL E-303 MIAMI FL	☒ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

Bank deposit #61.25

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 119.07(3)(k), 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: Martin Roth — 4/22/96 (Date) — 305 [illegible] (Daytime Phone #)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MARTIN ROTH

CR2E037 (12/95)