

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737901

FILED
Feb 19, 2005
Secretary of State

Entity Name: SPIRITUAL ASSEMBLY OF THE BAHAI'S OF CENTRAL DADE COUNTY, INC.

Current Principal Place of Business:

6624 (B) SW 114 PL
MIAMI, FL 33173 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 165231
MIAMI, FL 33116 US

New Mailing Address:

FEI Number: 65-0196354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEFFEY, FRANK
6624 (B) SW 114TH PL
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: PICARRETO, PAULETTE
Address: 10800 SW 126 AVE
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: PICCARRETO, ALDO
Address: 10800 SW 126 AVE
City-St-Zip: MIAMI, FL 33186

Title: TD () Delete
Name: SHEFFEY, FRANK
Address: 6624 B SW 114TH PL
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: FORES, DALE R
Address: 14760 SW 77 ST
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANK D. SHEFFEY

MR.

02/19/2005

Electronic Signature of Signing Officer or Director

Date