

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742109

FILED
Apr 16, 2007
Secretary of State

Entity Name: THE SPIRITUAL ASSEMBLY OF THE BAHAI'S OF HOLLYWOOD FLORIDA, INC.

Current Principal Place of Business:

2720 DEWEY ST
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

2720 DEWEY ST
HOLLYWOOD, FL 33020 US

New Mailing Address:

FEI Number: 65-0197051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAITHWAITE, SYLVESTER
3101 S OCEAN DRIVE, 2201
HOLLYWOOD, FL 33019 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: C () Delete
Name: REBHOLZ, MELODY
Address: 825 S 24TH AVE
City-St-Zip: HOLLYWOOD, FL 33020

Title: VC () Delete
Name: BRAITHWAITE, SYLVESTER
Address: 3101 S OCEAN DR #2201
City-St-Zip: HOLLYWOOD, FL 33019

Title: S () Delete
Name: BRAITHWAITE, CARLA
Address: 3101 S OCEAN DR #2201
City-St-Zip: HOLLYWOOD, FL 33019

Title: T () Delete
Name: RENNA, DIANE
Address: 4330 HILLCREST DR #815
City-St-Zip: HOLLYWOOD, FL 33021

Title: S () Delete
Name: OESEOLA, PEGGY
Address: 6561 JAMES E BILLE DR #2
City-St-Zip: HOLLYWOOD, FL 33996

Title: D () Delete
Name: PFEILSTICKER, ARLENE
Address: 2720 DEWEY ST
City-St-Zip: HOLLYWOOD, FL 33020 US

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:

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 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: SYLVESTER BRAITHWAITE

DR.

04/16/2007

Electronic Signature of Signing Officer or Director

Date