

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746737

FILED
Apr 04, 2005
Secretary of State

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

Current Principal Place of Business:

1310 CROSS CREEK CIR
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

4012 FORSYTHE WAY
TALLAHASSEE, FL 32309 US

New Mailing Address:

FEI Number: 59-2972846

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALAN, RUBEN
4012 FORSYTHE WAY
TALLAHASSEE, FL 32309 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: T () Delete
Name: MALAN, RUBEN
Address: 4012 FORSYTHE WAY
City-St-Zip: TALLAHASSEE, FL 32309

Title: VC () Delete
Name: KIMBLE, WILLIE
Address: 1326 HIGH ROAD APT. X3
City-St-Zip: TALLAHASSEE, FL 32304

Title: DS () Delete
Name: REED (FLORENCE), GRACE
Address: 501 GAILE AVE.
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Delete
Name: HARMER, MICHELLE
Address: 1800 MICCOSUKEE COM. DR., APT 1007
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: LAZAROVA, LUBA
Address: 1119 CHERRY STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: C () Delete
Name: KOEN, BENJAMIN
Address: 3424 GARDENVIEW
City-St-Zip: TALLAHASSEE, FL 32309

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 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: RUBEN MALAN

T

04/04/2005

Electronic Signature of Signing Officer or Director

Date