

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746737

FILED
Mar 29, 2010
Secretary of State

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

Current Principal Place of Business:

1310 CROSS CREEK CIR
D
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

1310 CROSS CREEK CIR
D
TALLAHASSEE, FL 32301 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:

KOEN, BENJAMIN D T
3424 GARDENVIEW WAY
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

SPIRITUAL ASSEMBLY, BAHAI'S OF TALLAHASSEE
1310 CROSS CREEK CIR
D
TALLAHASSEE, FL 32301 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: SPIRITUAL ASSEMBLY, BAHAI'S OF TALLAHASSEE

03/29/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C
Name: SPIRITUAL ASSEMBLY, BAHAI'S OF TALLAHASSEE
Address: 1310 CROSS CREEK CIR #D
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: MS.
Name: SEALY, MARIE VC
Address: 2222 MISSION RD. #2
City-St-Zip: TALLAHASSEE, FL 32304 US

Title: MS.
Name: ASHLIE, MARTIN
Address: 2203 W. PENSACOLA ST. APT. D1
City-St-Zip: TALLAHASSEE, FL 32304 US

Title: S
Name: SPIRITUAL ASSEMBLY, BAHAI'S OF TALLAHASSEE
Address: 1310 CROSS CREEK CIR. #D
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: T
Name: SPIRITUAL ASSEMBLY, BAHAI'S OF TALLAHASSEE
Address: 1310 CROSS CREEK CIR. #D
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: S
Name: SPIRITUAL ASSEMBLY, BAHAI'S OF TALLAHASSEE
Address: 1310 CROSS CREEK CIR. #D
City-St-Zip: TALLAHASSEE, FL 32301 US

I hereby 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 all other like empowered.

SIGNATURE: BENJAMIN D. KOEN

DR.

03/29/2010

Electronic Signature of Signing Officer or Director

Date