

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 28, 2003 8:00 am
Secretary of State

07-28-2003 90135 047 ****61.25

DOCUMENT # 746737

1. Entity Name

SPIRITUAL ASSEMBLY OF THE
BAHA'IS OF TALLAHASSEE, FL, INC



DO NOT WRITE IN THIS SPACE

90147252

2. Principal Place of Business

1310 Cross Creek Cir

3. Mailing Address

P.O. BOX 20114

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

TALLAHASSEE FL

City & State

Tallahassee FL

4. FEI Number

Applied For

Not Applicable

Zip

32301

Country

LEON

Zip

32316

Country

LEON

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Edward Price

Street Address (P.O. Box Number is Not Acceptable)

2765 W. Tharpe St #113

City

Tallahassee

FL

Zip Code

32303

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Edward A Price

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7/3/02

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TREASURER
RUBEN MALAN
4012 FORSYTHE WAY
TALLAHASSEE FL 32309

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE CHAIRMAN
Willie Kimble
1326 High Road Apt X3
Tallahassee FL 32304

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D (FLORENCE) GRACE REED
501 Gaile Avenue
Tallahassee FL 32311

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MICHELLE HARMER
1800 Miccosukee Com. Dr. Apt 1007
Tall, FL 32308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LUBA LAZAROVA
1119 CHERRY STREET
Tallahassee, FL 32303

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Chairperson
Edward Price
2765 W. Tharpe St #113
Tallahassee, FL 32303

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Edward A Price

7/20/03 523-9374

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037B (12/02)