2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 762167 1. Entity Name



May 05, 2006 8:00 am Secretary of State 05-05-2006 90157 009 ****61.25 THE SPIRITUAL ASSEMBLY OF THE BAHA'IS OF PALM BEACH COUNTY SOUTH INC. Principal Place of Business Mailing Address 9409 SW 1 PLACE 9409 SW 1 PLACE **BOCA RATON FL 33428 BOCA RATON FL 33428** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 65-0176811 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WELLS, CAROLYN 9409 SW 1 PLACE Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33428** Zip Code 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** Stangture, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 \$ 363 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Due By May 1, 2006", Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. CD ☐ Delete TITLE Change ✓ Addition TITLE Anthony L. Lopez 9481 Richmond Circle PAIR, DOUGLAS NAME 8649 JASMINE WAY STREET ADDRESS STREET ADDRESS Boca Raton, FL 33434 BOCA RATON FL 33496 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ■ Addition LOPEZ, ADRIANN Douglas Paik NAME NAME 8649 Jasmine Way 9481 RICHMOND CR STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33434** CITY-ST-ZIP Boca Raton FL 33496 CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE DAWES, PAIGE NAME NAME 23370 CAROLWOOD LANE APT 2201 STREET ADDRESS STREET ADDRESS BOCA RATON FL 33428 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TAVALARO, JOAN STREET ADDRESS 10215 BARNEGAT AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** TITLE ☐ Delete TITLE ☐ Change Addition PRITCHARD, EUGENIA NAME NAME 22370 CAROLWOOD LN. STREET ADDRESS STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP CITY-ST-7IP ☐ Delete Change ☐ Addition TITLE TITLE WELLS, CAROLYN NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS 9409 SW 1 PLACE

BOCA RATON FL 33428

NAME

CITY-ST-ZIP

HORIANN LOPEZ

FILED