

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762167

FILED
May 02, 2007
Secretary of State

Entity Name: THE SPIRITUAL ASSEMBLY OF THE BAHAI'S OF PALM BEACH COUNTY SOUTH INC.

Current Principal Place of Business:

9409 SW 1 PLACE
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

9409 SW 1 PLACE
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 65-0176811 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WELLS, CAROLYN
9409 SW 1 PLACE
BOCA RATON, FL 33428 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: PAIR, DOUGLAS
Address: 8649 JASMINE WAY
City-St-Zip: BOCA RATON, FL 33496

Title: T () Delete
Name: LOPEZ, ADRIANN
Address: 9481 RICHMOND CR
City-St-Zip: BOCA RATON, FL 33434

Title: D () Delete
Name: TAVALARO, JOAN
Address: 10215 BARNEGAT AVE
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: PRITCHARD, EUGENIA,
Address: 22370 CAROLWOOD LN.
City-St-Zip: BOCA RATON, FL

Title: S (X) Delete
Name: WELLS, CAROLYN
Address: 9409 SW 1 PLACE
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: PAIK, DOUGLAS
Address: 8649 JASMINE WAY
City-St-Zip: BOCA RATON, FL 33496

Title: VC (X) Change () Addition
Name: WARNER, JOHN
Address: 11719 TIMBERS WAY
City-St-Zip: BOCA RATON, FL 33428

Title: S (X) Change () Addition
Name: WELLS, CAROLYN
Address: 9409 SW 1 PLACE
City-St-Zip: BOCA RATON, FL 33428

Title: T (X) Change () Addition
Name: LOPEZ, ADRIANN
Address: 9481 RICHMOND CIRCLE
City-St-Zip: BOCA RATON, FL 33434

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ADRIANN LOPEZ

T

05/02/2007

Electronic Signature of Signing Officer or Director

Date