2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005366

FILED Mar 25, 2005 Secretary of State

Entity Name: SPIRIT OF AMERICA RESEARCH FOUNDATION, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
P.O. BOX LAKE MAI	952914 RY, FL 327952914				
Current Mailing Address:		New Mailing Address:			
	MILLION CIRCLE A, GA 30060				
El Number	: 52-1334916 FEI Nu	mber Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current I	Registered Agent:	Name and Address	of New Registered Agent:	
188 SUNL _AKE MAI The above	GORDON R AKE LOOP #110 RY, FL 32746 US e named entity submits to the control of t	his statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATU		ture of Registered Ag	ont on the second of the secon	 Date	
	Electronic eight	ture or registered rig	one	Bate	
SEEICED	S AND DIDECTORS.		ADDITIONS/CHAN/	GES TO DESICEDS AND DIDECTORS	
	S AND DIRECTORS:				
OFFICER Fitle: Name: Address: City-St-Zip:	S AND DIRECTORS: CP () Delete BUTLER, GORDON R PO BOX 952914 LAKE MARY, FL 327952	914	ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	GES TO OFFICERS AND DIRECTORS () Change () Addition	
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	CP () Delete BUTLER, GORDON R PO BOX 952914		Title: Name: Address:		
Fitle: Name: Address:	CP () Delete BUTLER, GORDON R PO BOX 952914 LAKE MARY, FL 327952 VCT () Delete LIENEMANN, KERRI 1139 VERMILLION CIRCI	.E	Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition	
Title: Name: Nddress: Dity-St-Zip: Title: Name: Nddress: Dity-St-Zip: Title: Name: Nddress:	CP () Delete BUTLER, GORDON R PO BOX 952914 LAKE MARY, FL 327952 VCT () Delete LIENEMANN, KERRI 1139 VERMILLION CIRCI MARIETTA, GA 30060 D () Delete BORCHARDT, RONALD 6331 OAK SHORE DRIVE	.E	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	() Change () Addition () Change () Addition	

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: GORDON BUTLER CP 03/25/2005