## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000005366

FILED Jan 25, 2006 Secretary of State

Entity Name: SPIRIT OF AMERICA RESEARCH FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 952914 P.O. BOX 951528

LAKE MARY, FL 327952914 LAKE MARY, FL 327951528

Current Mailing Address: New Mailing Address:

1139 VERMILLION CIRCLE 3139 CUSTER LAKE DRIVE MARIETTA, GA 30060 MARIETTA, GA 30064

FEI Number: 52-1334916 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BUTLER, GORDON R

488 SUNLAKE LOOP #110

LAKE MARY, FL 32746 US

BUTLER, GORDON R

700 SOUTH US HWY. 17-92

LONGWOOD, FL 32750 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: GORDON R. BUTLER 01/25/2006

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: CP ( ) Delete Title: CP (X) Change ( ) Addition

 Name:
 BUTLER, GORDON R
 Name:
 BUTLER, GORDON R

 Address:
 PO BOX 952914
 Address:
 PO BOX 951528

City-St-Zip: LAKE MARY, FL 327952914 City-St-Zip: LAKE MARY, FL 327951528

Title: VCT ( ) Delete Title: VCT (X) Change ( ) Addition

 Name:
 LIENEMANN, KERRI
 Name:
 LIENEMANN, KERRI

 Address:
 1139 VERMILLION CIRCLE
 Address:
 3139 CUSTER LAKE DRIVE

 City-St-Zip:
 MARIETTA, GA 30060
 City-St-Zip:
 MARIETTA, GA 30064

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BORCHARDT, RONALD
 Name:

 Address:
 6331 OAK SHORE DRIVE
 Address:

 City-St-Zip:
 SAINT CLOUD, FL 34771
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 MALLOW, JACK
 Name:

 Address:
 27951 GRATIOT AVE
 Address:

 City-St-Zip:
 ROSEVILLE, MI 48066
 City-St-Zip:

Title: S (X) Delete Title: ( ) Change ( ) Addition

 Name:
 HANSON, J. DESHEA
 Name:

 Address:
 1747 RUTLEDGE RD
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GORDON R. BUTLER CP 01/25/2006