2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003
Secretary of State

DOCUMENT# F98000005366

Entity Name: SPIRIT OF AMERICA RESEARCH FOUNDATION, INC.

Current Principal Place of Business:

P.O. BOX 952914
LAKE MARY, FL 327952914

New Principal Place of Business:

Current Mailing Address:

1139 VERMILLION CIRCLE
MARIETTA, GA 30060

New Mailing Address:

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

Name and Address of Current Registered Agent:

BUTLER, GORDON R
488 SUNLAKE LOOP #110
LAKE MARY, FL 32746 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:	CP	( ) Delete
Name:	BUTLER, GORDON R	
Address:	PO BOX 952914	
City-St-Zip:	LAKE MARY, FL 327952914	
Title:	VCT	( ) Delete
Name:	LIENEMANN, KERRI	
Address:	1139 VERMILLION CIRCLE	
City-St-Zip:	MARIETTA, GA 30060	
Title:	D	( ) Delete
Name:	BORCHARDT, RONALD	
Address:	6331 OAK SHORE DRIVE	
City-St-Zip:	SAINT CLOUD, FL 34771	
Title:	D	( ) Delete
Name:	MALLOW, JACK	
Address:	27951 GRATIOT AVE	
City-St-Zip:	ROSEVILLE, MI 48066	
Title:	S	( ) Delete
Name:	HANSON, J. DESHEA	
Address:	1747 RUTLEDGE RD	
City-St-Zip:	LONGWOOD, FL 32779	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: KERRI S. LIENEMANN VCT 05/01/2003

Electronic Signature of Signing Officer or Director — Date