

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004702

FILED
Mar 19, 2009
Secretary of State

Entity Name: SPIRITUAL ASSEMBLY OF THE BAHAI'S OF HILLSBOROUGH COUNTY NORTHWEST, FLORIDA, INC.

Current Principal Place of Business:

3112 NUNDY RD
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

PO BOX 274047
TAMPA, FL 336884047

New Mailing Address:

FEI Number: 11-3658073 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROBERTS, LEAH
10121 WOODSANG WAY
TAMPA, FL 33618 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: VCD () Delete
Name: KING, DARYLL M
Address: 7001 SEABURY CT.
City-St-Zip: TAMPA, FL 336152958

Title: D () Delete
Name: LASSEPAS, CARLOS QUIROGA
Address: 6842 MITCHELL CR
City-St-Zip: TAMPA, FL 33634

Title: CD () Delete
Name: ROBERTS, HARDY LEROY
Address: 10121 WOODSONG WAY
City-St-Zip: TAMPA, FL 336183710

Title: TD () Delete
Name: DEAN, ARDESHIR
Address: 15616 BEREADR
City-St-Zip: ODESSA, FL 33556

Title: SD () Delete
Name: LEAH, ROBERTS
Address: 10121 WOODSONG WAY
City-St-Zip: TAMPA, FL 33618

Title: D () Delete
Name: POURAN, DEAN D
Address: 15616 BEREADR.
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: QUIROGA-LASSEPAS, CARLOS H
Address: 6842 MITCHELL CR
City-St-Zip: TAMPA, FL 33634

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

Title: TD (X) Change () Addition
Name: DEAN, ARDESHIR V
Address: 15616 BEREADR
City-St-Zip: ODESSA, FL 33556

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

Title: D (X) Change () Addition
Name: THOMAS, RYKWALDER E
Address: 3008 SABAL ROAD
City-St-Zip: TAMPA, FL 33618

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: LEAH ROBERTS

SD

03/19/2009

Electronic Signature of Signing Officer or Director

Date