2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23906

FILED Apr 27, 2009 Secretary of State

Entity Name: THE SPIRITUAL ASSEMBLY OF THE BAHA'IS OF CORAL SPRINGS, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 12603 NW 6TH COURT CORAL SPRINGS, FL 33071 US **Current Mailing Address: New Mailing Address:** PO BOX 9746 CORAL SPRINGS, FL 33075 US FEI Number: 65-0053586 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: SMITH-TELLEZ, RUTH L MS SABET, BADI MR 12082 W SAMPLE ROAD 5020 NW 64TH DRIVE CORAL SPRINGS, FL 33065 US CORAL SPRINGS, FL 33067 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: BADI SABET 04/27/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition EGHBALI, SHAHEEN MR Name: Name: 12603 NW 6TH CT Address: Address: City-St-Zip: CORAL SPRINGS, FL 33071 YS City-St-Zip: Title: Title: () Delete () Change () Addition SABET, BADI MR Name: Name: Address: 5020 NW 64TH DRIVE Address: City-St-Zip: CORAL SPRINGS, FL 33067 US City-St-Zip: Title: () Delete Title: () Change () Addition ROUHIZAD, SHAHPUR MR Name: Name: Address: 8990 NW 49TH PLACE Address: City-St-Zip: CORAL SPRINGS, FL 33067 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: SABET, BADI MR Name: SABET, JOANNE MR 5020 NW 64TH DRIVE Address: Address: 5020 NW 64TH DRIVE City-St-Zip: CORAL SPRINGS, FL 33067 US City-St-Zip: CORAL SPRINGS, FL 33067 US Title: () Delete Title: () Change () Addition MILLIE, OTERO M MRS Name: Name: 2584 CORAL SPRINGS DR Address: Address: City-St-Zip: CORAL SPRINGS, FL 33067 US City-St-Zip: Title: () Delete Title: () Change () Addition LALEZARI. JOHN K MR Name: Name: Address: 10649 NW 49TH COURT Address: CORAL SPRINGS, FL 33076 US City-St-Zip: 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: SHAHEEN EGHBALI T 04/27/2009