

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004467

FILED
Apr 29, 2006
Secretary of State

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

Current Principal Place of Business:

11451 SW 82ND CT RD
OCALA, FL 34481 US

New Principal Place of Business:

Current Mailing Address:

11451 SW 82ND CT RD
OCALA, FL 34481 US

New Mailing Address:

FEI Number: 59-2995925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTA-RAMOS, JOSIE
1125 SW 123RD PL
OCALA, FL 34473 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: D () Delete
Name: BENNETT, JOANN
Address: 423 MARION OAKS GOLF RD.
City-St-Zip: OCALA, FL 34473

Title: D () Delete
Name: LETBETTER, DON
Address: 80 SE 61ST CT
City-St-Zip: OCALA, FL 34472

Title: D () Delete
Name: SANTA-RAMOS, JOSIE
Address: 1125 SW 123RD PLACE
City-St-Zip: OCALA, FL 34473

Title: D () Delete
Name: HIRONO, YOSUKE
Address: 13495 SE 93RD COURT RD
City-St-Zip: SUMMERFIELD, FL 34491

Title: D () Delete
Name: GRIFFIN, BARBARA
Address: 8680E SW 94TH LANE
City-St-Zip: OCALA, FL 34481

Title: D () Delete
Name: MILLIKEN, ROBERT
Address: 11451 SW 82ND COURT RD
City-St-Zip: OCALA, FL 34481

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BENNETT, JOANN
Address: 2640 N.E. 52ND CT. #45
City-St-Zip: SILVER SPRINGS, FL 34488

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

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

Title: D (X) Change () Addition
Name: HERRINGTON, LAURIE
Address: 9918 S.W. 62ND TERRACE
City-St-Zip: OCALA, FL 34476

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

Title: D (X) Change () Addition
Name: HERRINGTON, HOWARD
Address: 9918 S.W. 62ND TERRACE
City-St-Zip: OCALA, FL 34476

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: JOSIE SANTA-RAMOS

D

04/29/2006

Electronic Signature of Signing Officer or Director

Date