

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004467

FILED
Apr 26, 2008
Secretary of State

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

Current Principal Place of Business:

1125 SW 123RD PLACE
OCALA, FL 34473 US

New Principal Place of Business:

Current Mailing Address:

1125 SW 123RD PLACE
OCALA, FL 34473 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: 2640 N.E. 52ND CT. #45
City-St-Zip: SILVER SPRINGS, FL 34488

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: HERRINGTON, LAURIE
Address: 9918 S.W. 62ND TERRACE
City-St-Zip: OCALA, FL 34476

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STEPP, DEBORAH
Address: 595 FAIRWAYS CIRCLE #A
City-St-Zip: OCALA, FL 34472

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: 9083 SW 70TH LOOP
City-St-Zip: OCALA, FL 34481

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

Title: D (X) Change () Addition
Name: HERRINGTON, HOWARD
Address: 9083 SW 70TH LOOP
City-St-Zip: OCALA, FL 34481

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: JOSIE SANTA-RAMOS

D

04/26/2008

Electronic Signature of Signing Officer or Director

Date