

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000000542

1. Entity Name

THE SPIRITUAL ASSEMBLY OF THE BAHAI'S OF ROYAL P

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90012 042 ****61.25

Principal Place of Business

Mailing Address

PO BOX 211235
WEST PALM BEACH FL 33421

PO BOX 211235
WEST PALM BEACH FL 33421-1235

2. Principal Place of Business

3. Mailing Address

PO BOX 211235

Suite, Apt. #, etc.

PO BOX 211235

Suite, Apt. #, etc.

City & State

West Palm Beach FL

Zip 33421

Country

Palm Beach Co.

City & State

West Palm Beach FL

Zip 33421-1235

Country

Palm Beach Co.



DO NOT WRITE IN THIS SPACE

4. FEI Number

91-1861356

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LIEBERMANN, ANNE
111 RAINFOREST CT
ROYAL PALM BEACH FL 33411

7. Name and Address of New Registered Agent

Name

Gina M. Oliver

Street Address (P.O. Box Number is Not Acceptable)

170 Park Rd North

City

Royal Palm Beach

FL

Zip Code

33411

8. 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 Gina M. Oliver

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE CD ☐ Delete
NAME LIEBERMANN, TIM
STREET ADDRESS 111 RAINFOREST CT
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE TD ☐ Delete
NAME LIEBERMANN, ANNE
STREET ADDRESS 111 RAINFOREST CT
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE SD ☐ Delete
NAME SORRENTINO, JIM
STREET ADDRESS 237 BILBAO ST
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE CD ☒ Change ☐ Addition
NAME Calvin L. Oliver
STREET ADDRESS 170 Park Road North
CITY-ST-ZIP Royal Palm Beach, FL 33411

TITLE TD ☒ Change ☐ Addition
NAME Cindy Smith
STREET ADDRESS 126 Sparrow Drive Apt #13-A
CITY-ST-ZIP Royal Palm Beach, FL 33414

TITLE SD ☒ Change ☐ Addition
NAME Gina M. Oliver
STREET ADDRESS 170 Park Rd North
CITY-ST-ZIP Royal Palm Beach, FL 33411

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gina M. Oliver

Date

Daytime Phone #

4/27/00 373-4650

CR2E037 (9/99)