## 2007 NOT-FOR-PROFIT CORPORA

## **FILED** Apr 30, 2007 8:00 am Secretary of State

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ANNUAL REPORT	
DOCUMENT # 741857	
Entity Name "BASILIO SCIENTIFIC SCHOOL" SPIRITUAL SCIENCE	

ASSOCIATION, INC. Principal Place of Business Mailing Address 400000100 7226 N CORTEZ 7226 N CORTEZ P O BOX 151293 P 0 BOX 151293 TAMPA, FL 33684 **TAMPA, FL 33684** 115 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02052007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Numbe Applied For 59-2330688 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RAUL DARRIBA AVELLA, GABRIEL A. Street Address (P.O. Box Number is Not Acceptable) 6755 OLD PASCO RD WESLEY CHAPEL, FL 34249 4316 AUTUMN LEAVES DR. Zip Code 33 624 City TAMPA 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. I am familiar with, and accept the obligations of registered agent. RAUL DARRIBA SIGNATURE Signature, typed or printed name of registered agent and tide if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee Is \$61.25 \$5.00 May Be Due by May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PRESIDENT TITLE 🗹 Delete TITLE ☐ Addition Change . RAUL DARRIBA AVELLA, GABRIEL A. NAME LEAVES DR. 6755 OLD PASCO RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESLEY CHAPEL, FL 33544 CITY-ST-ZIP TAMPA, FL. 33624 TITLE VD 🗷 Delete TITLE VICE PRESIDENT Change Addition DARRIBA, RAUL NAME NAME GABRIEL AVELLA 4316 AUTUMN LEAVES DR STREET ADDRESS 6755 OLD PASCO STREET ADDRESS KD. CITY-ST-ZIP **TAMPA, FL 33624** CITY-ST-ZIP 33544 WESLEY CHAPEL, Fl. SECRETARY Delete TITLE Addition Change : AVELLA, PAULINA C NORMA SANCHEZ NAME NAME 6755 OLD PASCO ROAD STREET ADDRESS STREET ADDRESS 11810 SWEETPEA CT. CITY-ST-ZIP WESLEY CHAPEL, FL 33544 CITY-ST-ZIP TAM PA . FL. 33635 TITLE 🖄 Delete TREASURER SANCHEZ, NORMA NAME NAME PAULINA AVELLA 11810 SWEETPEA CT STREET ADDRESS STREET ADDRESS 6755 OLD PASCO R. CITY-ST-ZIP TAMPA, FL 33635 CITY-ST-ZIP WESLEY CHAPELI TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attachyfent with an address, with all other like empowered.

SIGNATURE:

RAUL DARRIBA; PRESIDEN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR