

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 712516 (4)

1. Corporation Name  
**THE FIRST CHURCH OF CHRIST SCIENTIST, INC., ZEPH YRHILLS, FLORIDA**



Principal Place of Business Mailing Address  
38543-4TH AVE 38543-4TH AVE  
ZEPHYRHILLS FL 33540 ZEPHYRHILLS FL 33540

3. Date Incorporated or Qualified 03/31/1967  
3a. Date of Last Report 05/01/1995  
4. FEI Number 59-2318063  
Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 25 Country 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent  
**HEINRICH, CYNTHIA A.  
37957 HILLSIDE LANE  
DADE CITY FL 33525**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
**37153 McMinn Ave**  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  
SIGNATURE Cynthia A Heinrich, Cynthia A Heinrich, Treasurer DATE 5/3/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PHILLIPS, DONALD M.	12 NAME	
STREET ADDRESS	37340 ORANGE ROW LANE	13 STREET ADDRESS	
CITY-ST-ZIP	DADE CITY FL	14 CITY-ST-ZIP	
TITLE	TDV <input type="checkbox"/> DELETE	2.1 TITLE	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HEINRICH, CYNTHIA A.	2.2 NAME	
STREET ADDRESS	37957 HILLSIDE LANE	2.3 STREET ADDRESS	37153 McMinn Ave
CITY-ST-ZIP	DADE CITY FL	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COX, ELIZABETH	3.2 NAME	
STREET ADDRESS	3375 JODI WEST	3.3 STREET ADDRESS	
CITY-ST-ZIP	DADE CITY FL	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURR, WILLIAM	4.2 NAME	
STREET ADDRESS	5246 16TH ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	ZEPHYRHILLS FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	DV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALSHE, KATHERINE	5.2 NAME	
STREET ADDRESS	37707 STATE ROAD 54	5.3 STREET ADDRESS	
CITY-ST-ZIP	ZEPHYRHILLS FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: Cynthia A Heinrich Cynthia A Heinrich DATE 5/3/96 (352)523-0294

CR2E037 (12/95)