2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # N08958** Mar 02, 2000 8:00 am 1. Entity Name **Secretary of State** FOURTH CHURCH OF CHRIST SCIENTIST, INC. 03-02-2000 90113 030 ****61.25 Principal Place of Business Mailing Address 8327 BEACH BOULEVARD 8327 BEACH BOULEVARD JACKSONVILLE FL 32216-3172 JACKSONVILLE FL 32216 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Inda Street Address (P.O. Box Number is Not Acceptable) GILLILAND, DUANE L 1518 SAMONTEE RD JACKSONVILLE FL 32211 Jacksonville 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 Fiorida. FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **Department of State FEE IS \$61.25** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS Change Delete TITLE TITLE Chelius, Kerstin 1350 Deerwood Club NAME NAME GILLILAND, DUANE STREET ADDRESS STREET ADDRESS 1518 SAMONTEE RD Jacksonville, FL 32256 CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32211 Moorefield, Kelly Change A 3501 Townsend Blud # 165 Delete TITLE D TITLE NAME REVELS, JEANNE NAME STREET ADDRESS STREET ADDRESS 4411 CHARTER POINT BLVD Jacksonville, FL 32277 CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL D ☐ Change **Addition** TITLE ☐ Delete TITLE Schwartz, Stanley 1957 Hickory Run East alvarez, Jane A NAME NAME STREET ADDRESS 4720 MARGATE DR STREET ADDRESS Orange Park, FL 32073 CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL Addition TITLE Delete TITLE John U.R. Williams BYRD, CONNIE NAME NAME 1818 Las Canas Ct. STREET ADDRESS STREET ADDRESS 1354 WOODWARD AVE CITY-ST-ZIP Jacksonville, FL 32256 CITY-ST-ZIP JACKSONVILLE FL 32207 ☐ Addition TITLE 🔀 Delete TITLE ☐ Change RUSSELL, EVA NAME NAME STREET ADDRESS STREET ADDRESS 1451 LIVE OAK LANE CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL TITLE Delete Addition RANGES. BARBARA NAME NAME 4059 BIG HOLLOW LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32277 12. Thereby certify that the information supplied with this filling 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.

Daytime Phone #