

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08958

FILED
Feb 17, 2005
Secretary of State

Entity Name: FOURTH CHURCH OF CHRIST SCIENTIST, INC.

Current Principal Place of Business:

8327 BEACH BOULEVARD
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

8327 BEACH BOULEVARD
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-1206115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYRD, CONNIE J
1354 WOODWARN AVE.
JACKSONVILLE, FL 32207 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: ENGLAND, BONNIE
Address: 1109 CHERRY ST. #2
City-St-Zip: JACKSONVILLE, FL 32205

Title: D () Delete
Name: MARTIN, JEAN
Address: 4651 RIDGE WALK LANE
City-St-Zip: JACKSONVILLE, FL 32257

Title: DT () Delete
Name: ALVAREZ, JANE A
Address: 4720 MARGATE DR
City-St-Zip: JACKSONVILLE, FL 32207

Title: CD () Delete
Name: MACDONALD, RICHARD
Address: 1060 FLORA PARK DR.
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: STOREY, LINDA
Address: 7011 HOLIDAY RD N.
City-St-Zip: JACKSONVILLE, FL 32216

Title: D () Delete
Name: SANDBERG, ANN
Address: 821 BROOKSTONE CT
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CHELIUS, KERSTIN
Address: 7789 DEERWOOD POINTE CT
City-St-Zip: JACKSONVILLE, FL 32256

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

Title: DT (X) Change () Addition
Name: POINDEXTER, CAROLE J
Address: 1149 MORVENWOOD RD
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Change () Addition
Name: WILLIAMS, JUDITH
Address: 7818 LAS CANAS CT
City-St-Zip: JACKSONVILLE, FL 32256

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KERSTIN CHELIUS

CHRM

02/17/2005

Electronic Signature of Signing Officer or Director

Date