

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08958

FILED  
Jan 19, 2012  
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 (X)

**Name and Address of Current Registered Agent:**

BYRD, CONNIE J  
1354 WOODWARD 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  
Name: CHELIUS, KERSTIN  
Address: 7789 DEERWOOD POINTE CT  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D  
Name: WOOTTON, CAREY  
Address: 931 LASALLE STREET  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D  
Name: JACKSON, MICHAEL  
Address: 132 MILL COVE LANE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D  
Name: POINDEXTER, JAMES  
Address: 4154 LONDON RD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D  
Name: WILLIAMS, JUDI  
Address: 7818 LAS CANAS COURT  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D  
Name: BYRD, CONNIE J  
Address: 1354 WOODWARD AVE  
City-St-Zip: JACKSONVILLE, FL 32207

I hereby 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 all other like empowered.

SIGNATURE: KERSTIN A. CHELIUS

D

01/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date