

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005718

FILED
Mar 04, 2012
Secretary of State

Entity Name: THE CHRISTIAN SCIENCE ASSOCIATION OF THE PUPILS OF ANN F. SEARLES CUMMINGS,
C.S.B., INC.

Current Principal Place of Business:

219 BAKER DRIVE
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

219 BAKER DRIVE
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-0639350 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CUMMINGS, ANN F SEARLES
219 BAKER DRIVE
WEST PALM BEACH, FL 33409 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: PD
Name: CUMMINGS, ANN F
Address: 219 BAKER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D
Name: KO, BIANCA
Address: 4898 WAVERLY TERRACE
City-St-Zip: LAKE WORTH, FL 33463

Title: D
Name: KO, BIANCA
Address: 4898 WAVERLEY WOODS TERRACE
City-St-Zip: LAKE WORTH, FL 33463

Title: DS
Name: BROWN-WIDELL, BONNIE-SUE
Address: 205 WORTH AVE
City-St-Zip: PALM BEACH, FL 33480

Title: D
Name: GRAY, NANCY R
Address: 717 US ONE #207
City-St-Zip: JUPITER, FL 33477

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: AND F. CUMMINGS

PRES

03/04/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date