

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700212

FILED
Apr 20, 2009
Secretary of State

Entity Name: THE FIRST CHURCH OF METAPHYSICAL SCIENCE, INC.

Current Principal Place of Business:

3279 SOUTEL DR
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

3279 SOUTEL DR
JACKSONVILLE, FL 32208

New Mailing Address:

45223 BISMARK RD.
CALLAHAN, FL 32011

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DYSON, JOHN R.
3265 SOUTEL DR
JACKSONVILLE, FL 32208 US

Name and Address of New Registered Agent:

DYSON, JOHN R.
45223 BISMARK RD.
CALLAHAN, FL 32011 US

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:

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: DYSON, JOHN R REV
Address: 3265 SOUTEL DR.
City-St-Zip: JACKSONVILLE, FL 32208

Title: VD () Delete
Name: DYSON, KAREN
Address: 3265 SOUTEL DR.
City-St-Zip: JACKSONVILLE, FL 32208

Title: SD () Delete
Name: LAROCHE, FREDA
Address: 432 W. 71ST STREET
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: PIGONI, NANCY
Address: 1218 HUNTER DR
City-St-Zip: JOLIET, IL 60431

Title: D () Delete
Name: WAGNER, MARY JO
Address: 652 CUSTER CIR
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: DYSON, JOHN R REV
Address: 45223 BISMARK RD.
City-St-Zip: CALLAHAN, FL 32011

Title: VD (X) Change () Addition
Name: DYSON, KAREN
Address: 45223 BISMARK RD
City-St-Zip: CALLAHAN, FL 32011

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

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 exemption stated in Chapter 119, 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: NANCY PIGONI

D

04/20/2009

Electronic Signature of Signing Officer or Director

Date