

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2001 8:00 am
Secretary of State

02-27-2001 90307 009 ****70.00

02-28

DOCUMENT # 700353

1. Entity Name

FIRST CHURCH OF RELIGIOUS SCIENCE, INC.

Principal Place of Business

Mailing Address

1550 N.E. 26TH ST
 WILTON MANORS FL 33305

1550 N.E. 26TH ST
 WILTON MANORS FL 33305

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1027751

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUTCHINSON, RUTH
 1550 NE 26TH ST.
 FT. LAUDERDALE FL 33305

Name

SUSAN KELLY

Street Address (P.O. Box Number is Not Acceptable)

1550 NE 26th Street

City

Ft. Lauderdale

FL

Zip Code

33305

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 Florida.

SIGNATURE SUSAN KELLY

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Susan Kelly

2/14/01

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **CTR** Delete
 NAME **BUMP, ARLEEN**
 STREET ADDRESS **5233 NW 89 DRIVE**
 CITY-ST-ZIP **CORAL SPRINGS FL**

TITLE Change Addition
 NAME **Trustee**
 STREET ADDRESS **2701-1 E. Aragon Blvd.**
 CITY-ST-ZIP **Sunrise, FL 33313**

TITLE **P** Delete
 NAME **LOCKARD, JAMES**
 STREET ADDRESS **1550 NE 26TH STREET**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33305**

TITLE Change Addition
 NAME **Ernest D. Chu**
 STREET ADDRESS **2443 S. Coral Trace Circle**
 CITY-ST-ZIP **Delray Beach, FL 33445**

TITLE **VPTR** Delete
 NAME **PYSER, JERRY**
 STREET ADDRESS **1550 NE 26 ST.**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33309**

TITLE Change Addition
 NAME **Treasurer**
 STREET ADDRESS **Dan Breitfeller**
 CITY-ST-ZIP **2300 NE 33rd Ave., #206 Ft. Lauderdale. 33305**

TITLE Delete
 NAME **JOHNSON, SANDRA**
 STREET ADDRESS **1550 NE 26 STREET**
 CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE Change Addition
 NAME **Gerald Rance**
 STREET ADDRESS **3600 Galt Ocean Drive #3A**
 CITY-ST-ZIP **Ft. Lauderdale, FL 33308**

TITLE Delete
 NAME **ALEY, LAMONT**
 STREET ADDRESS **1550 NE 26 STREET**
 CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE Change Addition
 NAME **Trustee**
 STREET ADDRESS **Joel Shapses**
 CITY-ST-ZIP **2713 NE 15th Street #2 Ft. Lauderdale, FL 33304**

TITLE Delete
 NAME **Bunny Krohn - Trustee**
 STREET ADDRESS **12619 Remo Court**
 CITY-ST-ZIP **Boca Raton, FL 33496**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: *James Lockard* **JAMES LOCKARD**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/01

Date

Daytime Phone #

CR2E037 (10/00)