2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700353

FILED Apr 10, 2007 Secretary of State

Entity Name: FIRST CHURCH OF RELIGIOUS SCIENCE, INC.

Current Principal Place of Business: New Principal Place of Business: 1550 N.E. 26TH ST WILTON MANORS, FL 33305 **Current Mailing Address: New Mailing Address:** 1550 N.E. 26TH ST WILTON MANORS, FL 33305 FEI Number: 59-1027751 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BUMP, ARLEEN CHARLES, GEDDES 2695 NW 122ND AVE 1550 NE 26TH ST CORAL SPRINGS, FL 33065 US WILTON MANORS, FL 33305 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: CHARLES GEDDES 04/10/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BUMP, ARLEEN Name: Name: 2695 NW 122ND AVE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: Title: () Delete Title: (X) Change () Addition CONLEY, DONNA Name: DEGROOT, IRENE Name: Address: 6711 NW 23RD TERR Address: 1550 NE 26TH ST City-St-Zip: FORT LAUDERALE, FL 33309 City-St-Zip: WILTON MANORS, FL 33305 Title: () Delete Title: () Change () Addition GEDDES, CHARLES Name: Name: 1550 NE 26TH ST Address: Address: City-St-Zip: WILTON MANORS, FL 33305 City-St-Zip: Title: () Delete Title: (X) Change () Addition COFFELT, GREGORY Name: FEGAN, PATRICIA Name: 3020 NE 5TH TERR 1550 NE 26TH ST Address: Address: City-St-Zip: WILTON MANORS, FL 33334 City-St-Zip: WILTON MANORS, FL 33305 Title: () Delete Title: (X) Change () Addition SHAPSES, JOEL STOCKING, GLENN Name: Name: 2713 NE 15TH ST 1550 NE 26TH ST Address: Address: FORT LAUDERDALE, FL 33304 City-St-Zip: City-St-Zip: WILTON MANORS, FL 33305 Title: () Delete Title: () Change () Addition CHU, ERNEST D Name: Name: Address: 1550 NE 26TH ST Address: WILTON MANORS, FL 33305 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES GEDDES PRES 04/10/2007