

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701701

FILED
Jan 19, 2009
Secretary of State

Entity Name: FIRST CHURCH OF CHRIST, SCIENTIST, VENICE, RIDA, INC.

Current Principal Place of Business:

600 WEST VINICE AVE
VENICE, FL 34285

New Principal Place of Business:

600 WEST VENICE AVE
VENICE, FL 34285

Current Mailing Address:

600 WEST VINICE AVE
VENICE, FL 34285

New Mailing Address:

600 WEST VENICE AVE
VENICE, FL 34285

FEI Number: 59-1426218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAIRBANK, SHEARMAN H
909 INLET CIR. RD.
VENICE, FL 34285 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: C () Delete
Name: FAIRBANK, SHEARMAN H
Address: 909 INLET CR. RD.
City-St-Zip: VENICE, FL 34285

Title: T () Delete
Name: DABOLL, JEANNE
Address: 5000 ASHTON GARDEN DR., 301
City-St-Zip: VENICE, FL 34292

Title: D (X) Delete
Name: AUXT, VIRGINIA
Address: 955 E. NOGOYA ST.
City-St-Zip: VENICE, FL 34292

Title: S () Delete
Name: CASS, BETTY
Address: 224 FLAMBOYANT ST.
City-St-Zip: NOKOMIS, FL 34275

Title: VC () Delete
Name: DOLLE, RUTH
Address: 333 THE ESPLANADE N. #204
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: DABOLL, JEANNE S
Address: 5000 ASHTON GARDEN DR., 216
City-St-Zip: VENICE, FL 34292

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

Title: CC (X) Change () Addition
Name: CASS, BETTY
Address: 224 FLAMBOYANT ST.
City-St-Zip: NOKOMIS, FL 34275

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: SHEARMAN H. FAIRBANK

C

01/19/2009

Electronic Signature of Signing Officer or Director

Date