

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90074 001 ****61.25

DOCUMENT # 702253

1. Entity Name

FIRST CHURCH OF CHRIST, SCIENTIST,
STUART, FLORIDA, INC.



Principal Place of Business

515 E OCEAN BLVD
STUART FL 34994
US

Mailing Address

515 E OCEAN BLVD
STUART FL 34994
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2096064

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~WATTS, KARLA~~
~~404 ILA ST~~
~~STUART FL 34994~~

LOOSE, DORIS
2138 S.W. Imperial St.
Port St. Lucie, FL 34987

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME RICHEY, LEROY M
STREET ADDRESS 579 NE PLANTATION RD., #N203
CITY-ST-ZIP PORT SAINT LUCIE FL 34986

TITLE D ☐ Delete
NAME GOODNER, SHIRLEY
STREET ADDRESS PO BOX 7133
CITY-ST-ZIP PORT SAINT LUCIE FL 34984

TITLE D ☐ Delete
NAME LOOSE, FRANK
STREET ADDRESS 2138 S W IMPERIAL ST
CITY-ST-ZIP PORT SAINT LUCIE FL 34987

TITLE D ☒ Delete
NAME MEYER, LILLIAN E
STREET ADDRESS 8433 SE DOUBLE TREE DR.
CITY-ST-ZIP HOBE SOUND FL 33455

TITLE D ☒ Delete
NAME GRAVES, JUNE
STREET ADDRESS 2126 NE FORK RD.
CITY-ST-ZIP STUART FL 34994

TITLE D ☐ Delete
NAME STEADWELL, MARCIA
STREET ADDRESS 1530 S W HERDER RD
CITY-ST-ZIP PORT SAINT LUCIE FL 34953

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME DRAGSETH, DORA JANE
STREET ADDRESS 3623 S.E. Old St. Lucie Blvd
CITY-ST-ZIP Stuart, FL 34996

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME HEATH, PATRICIA
STREET ADDRESS 14 Castle Hill Way
CITY-ST-ZIP Stuart, FL 34996

TITLE D ☐ Change ☒ Addition
NAME ROWELL, EARLEEN F.
STREET ADDRESS 1108 E. Osceola St.
CITY-ST-ZIP Stuart, FL 34996

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Franklin B. Loose*

2-3-06 712-336-0134