

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 703621

1. Entity Name

FIRST CHURCH OF CHRIST, SCIENTIST, BOCA RATON, F

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90082 002 ****61.25

Principal Place of Business

Mailing Address

566 W PALMETTO PARK RD
 BOCA RATON FL 33432

566 W PALMETTO PARK RD
 BOCA RATON FLA 33432-3656

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1143806

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DRUMMOND, GLORIA
 1428 SE 4 AVE., #264
 DEERFIELD BEACH FL 33441

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.

SIGNATURE

Gloria Drummond

1-29-2000

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

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	D <input type="checkbox"/> Delete
NAME	DRUMMOND, GLORIA
STREET ADDRESS	1428 SE 4 AVE., #264
CITY-ST-ZIP	DEERFIELD BEACH FL 33441
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	HARWOOD, JANE
STREET ADDRESS	875 E CAMINO REAL 14C
CITY-ST-ZIP	BOCA RATON FL 33432
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	LEDBETTER, SUSAN
STREET ADDRESS	2900 BANYAN BLVD. CIRCLE
CITY-ST-ZIP	BOCA RATON FL 33431
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	UTLEY, MARJORIE
STREET ADDRESS	701 E CAMIJO REAL APT 3H
CITY-ST-ZIP	BOCA RATON FL 33432
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	SHAFFER, DORIS
STREET ADDRESS	1287 SW 16 ST
CITY-ST-ZIP	BOCA RATON FL 33486
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	OLDS, RICHARD
STREET ADDRESS	1913 COQUINA WAY
CITY-ST-ZIP	CORAL SPRINGS FL

TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DRUMMOND, GLORIA
STREET ADDRESS	1428 SE 4 AVE., #264
CITY-ST-ZIP	DEERFIELD BEACH FL 33441
TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Pogue-Reed, Angela
STREET ADDRESS	1857 Jackson Street
CITY-ST-ZIP	Hollywood FL 33020
TITLE	C <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ledbetter, Susan
STREET ADDRESS	2900 Banyan Blvd, Circle
CITY-ST-ZIP	Boca RATon, FL 33431
TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Utley, Marjorie
STREET ADDRESS	449 S Maya Palm Dr
CITY-ST-ZIP	Boca Raton, FL 33432
TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dietz, Norman
STREET ADDRESS	4802 Orchard Lane
CITY-ST-ZIP	Delray Beach, FL 33445
TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Munroe, Claudia
STREET ADDRESS	1123 SW 4th ST
CITY-ST-ZIP	Boca Raton, FL 33486

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

Gloria Drummond
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954-481-3561
 1-29-2000

CR2E037 (9/99)