

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703621

FILED
Apr 05, 2007
Secretary of State

Entity Name: FIRST CHURCH OF CHRIST, SCIENTIST, BOCA RATON, FLORIDA, INC.

Current Principal Place of Business:

566 W PALMETTO PARK RD
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

566 W PALMETTO PARK RD
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 59-1143806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MABRY, FAYE
1074 NORTHWEST 13TH STREET
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

BONNIE, MAEHLMAN
566 W PALMETTO PK RD
BOCA RATON, FL 33432 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: BONNIE MAEHLMANN

04/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: BVC () Delete
Name: HILL, HARRIETTE M
Address: 745 APPLE TREE LANE
City-St-Zip: BOCA RATON, FL 33480

Title: BM () Delete
Name: JAMISON, SHARON
Address: 250 SOUTH OCEAN BOULEVARD 11F
City-St-Zip: BOCA RATON, FL 33432

Title: BC () Delete
Name: MABRY, FAYE M
Address: 1074 NW 13TH ST
City-St-Zip: BOCA RATON, FL 33486

Title: BM () Delete
Name: BOICE, YVONNE
Address: 561 NW GOLDEN HARBOUR DR
City-St-Zip: BOCA RATON, FL 33432

Title: BM () Delete
Name: SHAFFER, DORIS
Address: 1287 SW 16TH ST
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: H D MILLER

TRES

04/05/2007

Electronic Signature of Signing Officer or Director

Date