

# 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