

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90045 038 ****61.25

DOCUMENT # 703726

1. Entity Name

FIRST CHURCH OF CHRIST, SCIENTIST, DUNEDIN INC.

Principal Place of Business

Mailing Address

1650 PINEHURST ROAD
 DUNEDIN FL 34698

1650 PINEHURST ROAD
 DUNEDIN FL 34698-3842

2. Principal Place of Business

Same as above

3. Mailing Address

Same as above

Suite, Apt. #, etc.

Same as above

Suite, Apt. #, etc.

Same as above

City & State

Same as above

City & State

Same as above

4. FEI Number

70-3726620

Applied For

Not Applicable

Zip

Same

Country

U.S.A.

Zip

Same

Country

U.S.A.

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SMITH VINCENT F.
 2638 PINWOOD DRIVE
 DUNEDIN FL 34698

7. Name and Address of New Registered Agent

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 Vincent F. Smith

Vincent F. Smith

1-30-00

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

TITLE	DC	<input type="checkbox"/> Delete
NAME	RUTZ, JANET	
STREET ADDRESS	2694 BRATTLE LANE	
CITY-ST-ZIP	CLEARWATER FL 34621	
TITLE	T	<input type="checkbox"/> Delete
NAME	POTTER, GLEN D	
STREET ADDRESS	107 SHORE DRIVE	
CITY-ST-ZIP	DUNEDIN FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	COREY, RUTH H.	
STREET ADDRESS	1199 LAZY LAKE DRIVE WEST	
CITY-ST-ZIP	DUNEDIN FL	
TITLE	DC	<input checked="" type="checkbox"/> Delete
NAME	LEWIS, CHARLOTTE K X	
STREET ADDRESS	684 EDGEWATER DRIVE #848	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	D	<input type="checkbox"/> Delete
NAME	SCHOLET, SUZANNE L	
STREET ADDRESS	1637 SAN MATERO DRIVE	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	D	<input type="checkbox"/> Delete
NAME	BARNARD, KATHIE T	
STREET ADDRESS	1460 VALE COURT	
CITY-ST-ZIP	DUNEDIN FL 34698	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Theodore Tuggle	
STREET ADDRESS	4777 Pebble Brook Drive	
CITY-ST-ZIP	Oldsmar, Florida 34677	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Ruth H. Corey *Ruth H. Corey* 1/30/2000 (727) 733-7395

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #