

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2003 8:00 am**  
**Secretary of State**

04-23-2003 90073 006 \*\*\*\*61.25

**DOCUMENT # 706326**

1. Entity Name

**FIRST CHURCH OF CHRIST, SCIENTIST, EUSTIS, FLORI  
DA**



Principal Place of Business

**108 MAGNOLIA AVE  
EUSTIS FL 32726**

Mailing Address

**108 MAGNOLIA AVE  
EUSTIS FL 32726**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-6032872**

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

**BUTT, VIRGINIA S  
26515 SR 19  
HOWEY-IN-TH-HILLS FL 34737**

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**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>HASSELBRING, AMY</b>	
STREET ADDRESS	<b>404 S CENTER ST.</b>	
CITY-ST-ZIP	<b>EUSTIS FL 32726</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>EASTWOOD, JEANNE</b>	
STREET ADDRESS	<b>426 LAKE DORA DR</b>	
CITY-ST-ZIP	<b>TAVARES FL 32778</b>	
TITLE	<b>VC</b>	<input type="checkbox"/> Delete
NAME	<b>WUTKE, JOYCE</b>	
STREET ADDRESS	<b>5 ROYAL DRIVE</b>	
CITY-ST-ZIP	<b>EUSTIS FL 32726</b>	
TITLE	<b>C</b>	<input type="checkbox"/> Delete
NAME	<b>YARBROUGH, BERT</b>	
STREET ADDRESS	<b>P O BOX 1566</b>	
CITY-ST-ZIP	<b>EUSTIS FL 32726</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>BUTT, VIRGINIA S</b>	
STREET ADDRESS	<b>26515 SR 19</b>	
CITY-ST-ZIP	<b>HOWEY IN THE HILLS FL 34737</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>COUGHTRY, SUE ELLEN</b>	
STREET ADDRESS	<b>1843 OVERLOOK DRIVE</b>	
CITY-ST-ZIP	<b>MOUNT DORA FL 32757</b>	

TITLE	<b>VICE-CHAIRMAN</b>	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>WOLAVER, THOMAS</b>	
STREET ADDRESS	<b>23720 CR # 44A</b>	
CITY-ST-ZIP	<b>EUSTIS, FL 32726</b>	
TITLE	<b>DIRECTOR,</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BEDSOLE, BETTY J.</b>	
STREET ADDRESS	<b>501 OLD HWY 441, C-401</b>	
CITY-ST-ZIP	<b>MOUNT DORA, FL 32757</b>	
TITLE	<b>DIRECTOR</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>HASSELBRING, CAROLE</b>	
STREET ADDRESS	<b>404 S. CENTER ST.</b>	
CITY-ST-ZIP	<b>EUSTIS, FL 32726</b>	
TITLE	<b>DIRECTOR</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>LORD, SUSAN</b>	
STREET ADDRESS	<b>802 HASELTON ST.</b>	
CITY-ST-ZIP	<b>EUSTIS, FL 32726</b>	
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:

*[Signature]*

*04/21/03 352-357-3516*

CR2E037 (10/02)