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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 706330

(8)

FIRST CHURCH OF CHRIST, SCIENTIST, SEMINOLE, FLO RIDA, INC.								
Principal Place	e of Business	Mailing Address			T SOUND TOUR DESIGNATION OF THE OF	DEF DIDEL DIDEL BIDIL	OLDII Sibil IDDI	
11125 PARK	BŁ VD.	11125 PARK BLVD.						
UNIT 118 UNIT 118								
SEMINOLE FI	L 34642	SEMINOLE FL 34642	2		Date Incorporated or Qualified 3.	a. Date of Last	Roport	
					10/25/1963	11/02/19		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	<del></del>	Applied For	
21		26	26		59-2846974	<b>}</b>	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional		
22		27		5. Certificate of Status Desired	Fee F	Required		
City & State		Crty & State		6. Election Campaign Financing	\$5.0	O May Be		
23 Zin	Country	28		<u>-</u>	Trust Fund Contribution —	Added	d to Fees	
Zip <b>24</b>	Country 25	Zip <b>29</b>	Counti	ry	8. This corporation has liability for intangi		199.032,	
	9. Name and Address of Curre		[30]		Florida Statutes Ye 10. Name and Address of New Registe	s 🗶 No		
			8	1 Name	To the distribution of the line of the lin	nou rigoni		
RICHARI	D. LYNN 7		-	0.00	Add (D.O. Day Marchael No. According			
RICHARD, LYNN Z 994 <b>9</b> 69TH STREET NORTH PINELLAS PARK FL 34666			8:	2 Street	Address (P.O. Box Number is Not Acceptable)			
			8:	3				
!			Ļ	4 00				
			8-	4 City		FL  85   Zip	Code	
or register	to the provisions of Sections 617.050; ed agent, or both, in the State of Flor th, and accept the obligations of, Sec	ida. Such change was autho	orized by the cor	-named co poration's	orporation submits this statement for the purpose oboard of directors. I hereby accept the appointme	of changing its re nt as registered	egistered office agent. I am	
SIGNATURE .	Signature, typed or printed name of registered agen	•			equired whon reinstating) Da			
12.		ID DIRECTORS	13.	en: signature r	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
THLE	CD	DELETE	1.1 TITLE			Change	Addition	
NAME	RICHARD, LYNN Z	_	1.2 NAME	:			-	
STHEET ADDRESS	9949 69TH STREET NORTH	AND ANTIL OTREET MORTH						
				ET ADDRESS				
CITY-ST-ZIP	PINELLAS PARK FL 34666			ET ADDRESS			;	
CITY-ST-ZIP TITLE	VCTD	DELETE	1.3 STRE	ET ADDRESS ST-ZIP	T/D	<b>⊠</b> Change	Add-tion	
		DELETE	1.3 STRE	ET ADDRESS ST-ZIP	ZABRISKIE, HELEN M	•	Add-tion	
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption state of Section 1190/3/K. Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: HELEN M. ZABRISKIE, TREAS. Alle M. Zakinkie 4/8/96 (813) 544-4805

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95