


FILE NOW: FILING FEE IS \$61.25

FILED
Apr 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # 706773 (9)

1. Corporation Name
FIRST CHURCH OF CHRIST, SCIENTIST, INC. BOYNTON BEACH, FLORIDA

Principal Place of Business 2121 S. SEACREST BLVD. BOYNTON BEACH FL 33435	Mailing Address 2121 S. SEACREST BLVD. BOYNTON BEACH FL 33435
---	---

3. Date Incorporated or Qualified 01/30/1964		
4. FEI Number 59-1407279	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No n/a	

9. Name and Address of Current Registered Agent

COOK, EDWARD
1215 SW 22ND AVE
BOYNTON BEACH FL 33426

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD <input type="checkbox"/> DELETE	1.1 TITLE	only T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BACHMAN, ESTHER	1.2 NAME	
STREET ADDRESS	1815 SW CONGRESS BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL	1.4 CITY-ST-ZIP	
TITLE	ACD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOX, JOAN	2.2 NAME	
STREET ADDRESS	921 GARDENIA DRIVE #271	2.3 STREET ADDRESS	
CITY-ST-ZIP	DEL RAY BEACH FL	2.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VIVAN, RHONA	3.2 NAME	Shasek, Audrey
STREET ADDRESS	2033A. S. SEACREST BLVD (term exp.)	3.3 STREET ADDRESS	10105 40th Terrace
CITY-ST-ZIP	BOYNTON BEACH FL	3.4 CITY-ST-ZIP	Boynton Beach, FL 33436
TITLE	SD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAUMANN, GLORIA J.	4.2 NAME	
STREET ADDRESS	4931-A DOVEWOOD ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL	4.4 CITY-ST-ZIP	
TITLE	CD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOK, EDWARD M	5.2 NAME	
STREET ADDRESS	1215 SW 22ND AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	Wolf, Lorna E.
STREET ADDRESS		6.3 STREET ADDRESS	48006 Jaruco Bay
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Boynton Beach, FL 33436

14. 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 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: *Edward M. Cook* Chairman 4/21/98 (561) 734-3504

CR2E037 (10/97)