

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 709057

1. Entity Name

FIRST CHURCH OF CHRIST, SCIENTIST, SEBRING, FLOR

Principal Place of Business

CHRISTIAN SCIENCE SOCIETY
146 NO FRANKLIN ST
SEBRING FL 33870

Mailing Address

~~146 NO FRANKLIN ST~~
146 NO FRANKLIN ST
SEBRING FL 33870-3121
US

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

59-1094835

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

LIVINGSTON, JAMES
445 SOUTH COMMERCE
SEBRING FL 33870

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE CD ☐ Delete
NAME WELCH, VIRGINIA
STREET ADDRESS 11 RICHARDS DR
CITY-ST-ZIP LAKE PLACID FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☒ Delete
NAME MOSES, FLORENCE
STREET ADDRESS 928 LKE DAMON DR
CITY-ST-ZIP AVON-PK FL 33872

TITLE Vice Chairman ☐ Change ☒ Addition
NAME Ralph M. Metzger
STREET ADDRESS 9124 Markland Lane
CITY-ST-ZIP Sebring, FL 33872-5905

TITLE D ☒ Delete
NAME KOEPPPEL, SHIRLEY E
STREET ADDRESS 517 RYAN RD
CITY-ST-ZIP SEBRING FL 33870

TITLE D ☐ Change ☒ Addition
NAME Lori Keyes
STREET ADDRESS 4918 Granada Blvd.
CITY-ST-ZIP Sebring, FL 33872-2324

TITLE D ☐ Delete
NAME MOSES, FLORENCE
STREET ADDRESS 928 LAKE DAMON DR
CITY-ST-ZIP AVON PARK FL 33825

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME HEDENBERG, MAJORIE
STREET ADDRESS 4301 LKE VISTA DR
CITY-ST-ZIP SEBRING FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME COONLEY, DOROTHY V
STREET ADDRESS 6750 US 27 NORTH, A-1
CITY-ST-ZIP SEBRING FL

TITLE ☐ Change ☐ 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: Dorothy V. Coonley, T. 3-5-00 941 471-0368

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

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

03-08-2000 90036 027 ****61.25

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