

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90098 049 ****61.25

DOCUMENT # 709095

1. Entity Name

FIRST CHURCH OF CHRIST, SCIENTIST, LAUDERDALE BY

Principal Place of Business

Mailing Address

**251 COMMERCIAL BLVD
 LAUDERDALE-BY-THE-SEA FL 33308**

**251 COMMERCIAL BLVD
 LAUDERDALE-BY-THE-SEA FL 33308**

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

59-2439260

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

**TUTING, FERN
 1410 NW 42 ST
 FORT LAUDERDALE FL 33309**

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VCD
 WESTERBERG, BETTY
 4914 NE 2 TERRACE
 POMPANO BCH FL 33064** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 Eleanore Kness
 380 SE 5th Ave.
 Pompano Beach, FL 33060** ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CD
 RYAN, BARBARA
 3300 NE 36 STREET #1002
 FORT LAUDERDALE FL 33308** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VCD
 BARBARA RYAN
 3300 NE 36 ST. #1002
 FT. LAUDERDALE, FL 33308** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**ST
 TUTING, FERN
 1410 NW 42 ST
 FORT LAUDERDALE FL 33309** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**STD
 FERN TUTING
 1410 NW 42 ST.
 Ft. Lauderdale, FL 33309** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 SMITH, RAY
 3200 PORT ROYALE DRIVE
 FORT LAUDERDALE FL 33308** ☒ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 WIRTH, CATHY
 267 ALGIERS AVENUE
 LAUDERDALE BY THE SEA FL** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CD
 CATHY WIRTH
 267 ALGIERS AVE
 LAUDERDALE by the Sea, FL** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 KLEIN, FRANK
 4301 NE 17TH AVE
 OAKLAND PARK FL 33334** ☐ Delete

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

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:

Fern Tutting **FERN TUTTING**

4/26/2001 954-491-6590

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

0045768