

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 06, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 709095**  
 1. Entity Name  
**FIRST CHURCH OF CHRIST, SCIENTIST, LAUDERDALE BY THE SEA, FLORIDA, INC.**



Principal Place of Business      Mailing Address  
 251 COMMERCIAL BLVD      251 COMMERCIAL BLVD  
 LAUDERDALE-BY-THE-SEA, FL 33308      LAUDERDALE-BY-THE-SEA, FL 33308



03302005 No Chg-NP      CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
**59-2439260**      Not Applicable

5. Certificate of Status Desired            **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
 TUTING, FERN  
 1410 NW 42 ST  
 FORT LAUDERDALE, FL 33309

**DO NOT WRITE IN THIS SPACE**

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: *Fern Tuting*      (NOTE: Registered Agent signature required when reinstating)      DATE: *April 4, 2005*

**Filing Fee is \$81.25**  
**Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LEVI, MARGARET
STREET ADDRESS	1000 S. OCEAN BLVD PH-O
CITY-ST-ZIP	POMPANO BEACH, FL 33062
TITLE	STD
NAME	TUTING, FERN
STREET ADDRESS	1410 NW 42 ST
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309
TITLE	CD
NAME	WIRTH, CATHY
STREET ADDRESS	267 ALGIERS AVENUE
CITY-ST-ZIP	LAUDERDALE BY THE SEA, FL
TITLE	D
NAME	KLEIN, FRANK
STREET ADDRESS	4301 NE 17TH AVE
CITY-ST-ZIP	OAKLAND PARK, FL 33334
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1000000290480  
 04/06/05-80068-004 61.25

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 Tuting*      DATE: *4/4/2005*      DAYTIME PHONE #: *954-491-6590*