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Feb 27, 1999 8:00 am  
Secretary of State

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 709474

1. Corporation Name

SECOND CHURCH OF CHRIST, SCIENTIST, HOLLYWOOD, FLORIDA, INC.

Principal Place of Business

5726 WASHINGTON ST  
HOLLYWOOD FL 33023

Mailing Address

5726 WASHINGTON ST  
HOLLYWOOD FL 33023



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

08/19/1965

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-1367786

Applied For

Not Applicable

22

27

City & State

City & State

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

23

28

Zip Country

Zip Country

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOCHEN, MARJORIE V  
5030 BUCHANAN ST  
HOLLYWOOD FL 33021

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 MARJORIE V. LOCHEN

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Marjorie V. Lochen

2/2/99

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DC  
NAME NICK, JUNE A  
STREET ADDRESS 430 COMMODORE DR. APT 311  
CITY-ST-ZIP PLANTATION FL

☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME SIEGEL, HELENE  
STREET ADDRESS 12950 SW 7TH COURT APT. 104  
CITY-ST-ZIP PEMBROKE PINES FL 33027

☒ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE D  
NAME LE CORNU, YVONNE  
STREET ADDRESS 8653 SHERATON DR  
CITY-ST-ZIP MIRAMAR FL

☐ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME ASOWITCH, BARBARA  
STREET ADDRESS 10244 S.W. 12TH ST  
CITY-ST-ZIP PEMBROKE PINES FL

☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME LOCHEN, MARJORIE  
STREET ADDRESS 5030 BUCHANAN ST  
CITY-ST-ZIP HOLLYWOOD FL 33021

☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE T  
NAME LOCHEN, MARJORIE  
STREET ADDRESS 5030 BUCHANAN STREET  
CITY-ST-ZIP HOLLYWOOD FL 33021

☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE: Marjorie V. Lochen 2/2/99 954-981-0488

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)