

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90366 021 ****61.25

DOCUMENT # 709474

1. Entity Name

CHRISTIAN SCIENCE SOCIETY HOLLYWOOD, FL.,
INC.



Principal Place of Business

5726 WASHINGTON ST
HOLLYWOOD FL 33023

Mailing Address

5726 WASHINGTON ST
HOLLYWOOD FL 33023

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

90-0017431

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SHANNON, PATRICIA
901 S 24TH TERRACE
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Patricia Shannon

4/10/06

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

(NOTE: Registered Agent signature required when restate)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SIEGEL, HELENE
12950 SW 7 CT #104
PEMBROKE PINES FL 33027

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
DC
LE CORNU, DALE
8653 SHERATON DRIVE
MIRAMAR FL 33025

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
D
LE CORNU, YVONNE
8653 SHERATON DR
MIRAMAR FL 33025

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
D
ASOWITCH, BARBARA
10244 S.W. 12 ST.
PEMBROKE PINES FL 33025

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
T
SHANNON, PATRICIA
901 S. 24 TERR.
HOLLYWOOD FL 33023

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Dale Le Cornu, chairman*

4/5/06 954-437-4324