## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 709474** 

FILED Jul 09, 2009 Secretary of State

Entity Name: CHRISTIAN SCIENCE SOCIETY HOLLYWOOD, FL., INC.

**Current Principal Place of Business: New Principal Place of Business:** 5726 WASHINGTON ST HOLLYWOOD, FL 33023 **Current Mailing Address: New Mailing Address:** 5726 WASHINGTON ST HOLLYWOOD, FL 33023 FEI Number: 90-0017431 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHANNON, PATRICIA SHANNON, PATRICIA TREAS 901 S 24TH TERRACE 901 S 24TH TERRACE HOLLYWOOD, FL 33020 US HOLLYWOOD, FL 33020 US 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: PATRICIA SHANNON 07/09/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GOTTLIEB, EDWARD A Name: Name: 2730 NE 183 ST. Address: Address: City-St-Zip: NORTH MIAMI BEACH, FL 33160 City-St-Zip: Title: DC ( ) Delete Title: () Change () Addition Name: LE CORNU, DALE Name: Address: 8653 SHERATON DRIVE Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: Title: () Delete Title: () Change () Addition LE CORNU, YVONNE Name: Name: 8653 SHERATON DR Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: ( ) Delete Title: Title: () Change () Addition RAUSCHKOLB, JAMES Name: Name: Address: 4175 SW 186 WAY Address: City-St-Zip: MIRAMAR, FL 33029 City-St-Zip: Title: Title: () Delete () Change () Addition SHANNON, PATRICIA Name: Name: 901 S. 24 TERR. Address: Address: HOLLYWOOD, FL 33023 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DALE LE CORNU DC 07/09/2009