2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 709474

FILED Apr 19, 2003 Secretary of State

Entity Name: SECOND CHURCH OF CHRIST, SCIENTIST, HOLLYWOOD, FLORIDA, 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: 59-1367786 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KAIN, MARY J 218 S. 56 TERR HOLLYWOOD, FL 33023 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DC () Delete () Change () Addition KAIN, MARY JANE Name: Name: 218 S 56 TERRACE Address: Address: City-St-Zip: HOLLYWOOD, FL 33023 City-St-Zip: Title: Title: (X) Change () Addition () Delete LECOMY, DALE Name: LE CORNU, DALE Name: Address: 8653 SHERATON DRIVE Address: 8653 SHERATON DRIVE City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: MIRAMAR, FL 33025 Title: () Delete Title: (X) Change () Addition LE CORNU, YVONNE LE CORNU, YVONNE Name: Name: 8653 SHERATON DR 8653 SHERATON DR Address: Address: City-St-Zip: MIRAMAR, FL City-St-Zip: MIRAMAR, FL 33025 Title: () Delete Title: (X) Change () Addition ASOWITCH, BARBARA Name: SIEGEL, HELENE Name: Address: 12950 SW 7 CT #104 Address: 10244 S.W. 12 ST. City-St-Zip: PEMBROKE PINES, FL 33027 City-St-Zip: PEMBROKE PINES, FL 33025 Title: () Delete Title: (X) Change () Addition KAIN, MARY J SHANNON, PATRICIA Name: Name: 218 S 56 TERR 901 S. 24 TERR. Address: Address: HOLLYWOOD, FL 33023 City-St-Zip: City-St-Zip: HOLLYWOOD, FL 33023

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARY JANE KAIN DC 04/19/2003