


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90457 029 \*\*\*\*61.25

**DOCUMENT # 713721**

1. Entity Name  
**FIRST CHURCH OF CHRIST, SCIENTIST, ORMOND BEACH, FLORIDA, INC.**




Principal Place of Business  
**100 NORTH HALIFAX DRIVE  
 ORMOND BEACH, FL 32176**

Mailing Address  
**100 NORTH HALIFAX DRIVE  
 ORMOND BEACH, FL 32176**

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 Zip Country



04292004 Chg-NP CR2E037 (10/03)

6. Name and Address of Current Registered Agent  
**ANDERSON, ROYAL A.  
 1108 KILLARNEY DR  
 ORMOND BEACH, FL 32172**

4. FEI Number  
**59-2480009**

Applied For  
 Not Applicable

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

7. Name and Address of New Registered Agent  
 Name **GLORIA B. SWARD**  
 Street Address (P.O. Box Number is Not Acceptable)  
**3 Sea Dune Terrace**  
 City **Ormond Beach FL** Zip Code **32176**

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 *Gloria B. Sward* DATE **4/29/04**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is **\$61.25** Due by **May 1, 2004**

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 NAME STREET ADDRESS CITY-ST-ZIP	C SWARD, GLORIA B 3 SEA DUNES TERR. ORMOND BEACH, FL 32176	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ESCOFFIER, MARIAN 15 RAINBOW FALLS DR ORMOND BEACH, FL 32174	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BILLINGS, HENRY 237 ORMWOOD DR ORMOND BEACH, FL 32176	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ANDERSON, ROYAL A. 1108 KILLARNEY DR ORMOND BEACH, FL 32172	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Marilyn Romain 72 Carol Road Ormond Beach FL 32176	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Yvonne Punnett 115 Coquina Ave. Ormond Beach FL 32174	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Marjorie Caswell 7500 Farers Drive Ormond Beach FL 32176	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 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: *Gloria B. Sward* DATE: **4/29/04** DAYTIME PHONE #: **386-405-1371**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Attachment*

1401707a  
~~# 713721~~

**First Church of Christ, Scientist  
100 N. HALIFAX DRIVE  
Ormond Beach, FL 32176**

April 29, 2004

RE: Changes on Incorporation Annual Report

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Registered Agent: Gloria B. Sward  
3 Sea Dune Terrace  
Ormond Beach, FL 32176

Chairman: Marilyn Romain  
72 Carol Road  
Ormond Beach, FL 32176

Directors: Royal Anderson  
1195 Killarney Drive  
Ormond Beach, FL 32172

Marjorie Caswell  
7 Seafarers Drive  
Ormond Beach, FL 32176

Treasurer Yvonne Punnett  
115 Coquina Avenue  
Ormond Beach, FL 32174

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Assistant Treasurer Gloria B. Sward  
3 Sea Dune Terrace  
Ormond Beach, FL 32176