## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#713721** 

FILED Apr 19, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

100 NORTH HALIFAX DRIVE ORMOND BEACH, FL 32176

Current Mailing Address: New Mailing Address:

100 NORTH HALIFAX DRIVE ORMOND BEACH, FL 32176

FEI Number: 59-2480009 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:

PUNNETT, YVONNE

115 COQUINA AVE

ORMOND BEACH, FL 32174 US

DASSANCE, TAMMY

3 SEA DUNE TERRACE

ORMOND BEACH, FL 32176 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: TAMMY DASSANCE 04/19/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 T
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 JOHNSON, SUSAN
 Name:
 SWARD, GLORIA

 Address:
 26 KATHLEEN TRAIL
 Address:
 3 SEA DUNE TERRACE

Address: 26 KATHLEEN TRAIL Address: 3 SEA DUNE TERRACE
City-St-Zip: PALM COAST, FL 32164 City-St-Zip: ORMOND BEACH, FL 32176

Title: C ( ) Delete Title: D (X) Change ( ) Addition Name: PHANEUF, RUTH Name: LEWIS, JEAN

Address: 1050 OCEAN SHORE BLVD D Address: 89 SOUTH ATLANTIC AVENUE City-St-Zip: ORMOND BEACH, FL 32164 City-St-Zip: ORMOND BEACH, FL 32176

Title: T () Delete Title: T (X) Change () Addition

 Name:
 PUNNETT, YVONNE
 Name:
 DASSANCE, TAMMY

 Address:
 115 COQUINA AVE.
 Address:
 3 SEA DUNE TERRACE

 City-St-Zip:
 ORMOND BEACH, FL 32174
 City-St-Zip:
 ORMOND BEACH, FL 32176

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ROMAIN, MARILYN
 Name:

 Address:
 72 CAROL RD
 Address:

 City-St-Zip:
 ORMOND BEACH, FL 32176
 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: TAMMY DASSANCE T 04/19/2009