2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713953

FILED Mar 25, 2007 Secretary of State

Entity Name: FIRST CHURCH OF CHRIST, SCIENTIST, PORT CHARLOTTE, FLORIDA, INC.

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

21090 ILIADE AVE.

PORT CHARLOTTE, FL 33952

Current Mailing Address: New Mailing Address:

21090 ILIADE AVE.

PORT CHARLOTTE, FL 33952

FEI Number: 59-6142117 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:

OAKS, DAVID K.

407 E. MARION AVE.

TAX MARSHALLS, INC.
1444 ABSCOTT ST

PUNTA GORDA, FL 33950 US PT CHARLOTTE, FL 33952 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: PHILLIP MARSHALL 03/25/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: PD (X) Change() Addition

 Name:
 BERNDTSON, EDWARD
 Name:
 GOULD, MARION

 Address:
 25245 ZODIAC LANE
 Address:
 2486 CARING WAY, #10-A

 City-St-Zip:
 PUNTA GORDA, FL 33983
 City-St-Zip:
 PT CHARLOTTE, FL 33954

Title: S () Delete Title: D (X) Change () Addition Name: SCHARFF, MARY Name: PERRIN, EDITH

 Address:
 1505 KIRKWOOD ST
 Address:
 21090 LLIADE AVE

 City-St-Zip:
 NORTH PORT, FL 34286
 City-St-Zip:
 PT CHARLOTTE, FL 33952

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

Name:ST. CLAIR, NANCIName:ST. CLAIR, NANCYAddress:1383 ABALOM ST.Address:1383 ABALOM ST.

City-St-Zip: PORT CHARLOTTE, FL 33980 City-St-Zip: PORT CHARLOTTE, FL 33980

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

 Name:
 MASON, VIVIENNE
 Name:

 Address:
 1000 KINGS HWY #153
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33980
 City-St-Zip:

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

 Name:
 SHEIL, CATHERINE
 Name:
 SHEIL, CATHERINE

 Address:
 P.O BOX 380432
 Address:
 P.O BOX 380432

 City-St-Zip:
 MURDOCK, FL 339380432
 City-St-Zip:
 MURDOCK, FL 33938

I hereby certify that the information supplied with this filing does not qualify for the 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: PHILLIP MARSHALL RA 03/25/2007