

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 19, 2008 8:00 am
Secretary of State

08-19-2008 90004 022 ****61.25

DOCUMENT # 714265

1. Entity Name

FIRST CHURCH OF CHRIST, SCIENTIST, PENSACOLA,
FLORIDA, INCORPORATED



Principal Place of Business

4880 N 9TH AVE
PENSACOLA FL 32503

Mailing Address

4880 N 9TH AVE
PENSACOLA FL 32503

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E037 (4/08)

4. FEI Number

23-7168480

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DICKENS, CAROLYN
1280 TATE SCH RD
CANTONMENT FL 32533

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Carolyn Dickens

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By September 3, 2008

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	D	<input checked="" type="checkbox"/> Delete
NAME	GIBSON, CANDANCE	
STREET ADDRESS	1408 GLENMARC DR	
CITY-ST-ZIP	CANTONMENT FL 32533	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ZOELLER, NAOMI L	
STREET ADDRESS	200 PENSACOLA BEACH RD. F-4 SUN CHASE	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SWICKLEY, SHIRLEY	
STREET ADDRESS	10148 BITTERN DR.	
CITY-ST-ZIP	PENSACOLA FL 32507	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BROOK, SYLVIA	
STREET ADDRESS	1914 E. LEE ST.	
CITY-ST-ZIP	PENSACOLA FL 32503	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ELLSWORTH, MARJORIE	
STREET ADDRESS	1894 BRENDA AVE	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE	S	<input type="checkbox"/> Delete
NAME	DICKENS, CAROLYN	
STREET ADDRESS	1280 TATE SCHEOOL ROAD	
CITY-ST-ZIP	CANTONMENT FL 32533	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Frazier, Thomas	
STREET ADDRESS	2898 Creekwood Dr.	
CITY-ST-ZIP	Cantonment, FL 32533	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Terri Noel	
STREET ADDRESS	8350 Strasburg Rd.	
CITY-ST-ZIP	Pensacola, FL 32514	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Zoeller, Gilbert	
STREET ADDRESS	200 Pensacola Beach Rd. F-1	
CITY-ST-ZIP	Sun Chase, Gulf Breeze FL 32561	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Weeks, Barbara	
STREET ADDRESS	825 Bayshore Dr.	
CITY-ST-ZIP	Pensacola, FL 32507	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Wood, Jacqueline	
STREET ADDRESS	168 Mirabelle Circle.	
CITY-ST-ZIP	Pensacola, FL 32514	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Carolyn Dickens