

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 17, 2004 8:00 am**  
**Secretary of State**

02-17-2004 90025 023 \*\*\*\*61.25

**DOCUMENT # 717818**

1. Entity Name

THE WINTER PARK CHURCH OF RELIGIOUS SCIENCE,  
INC.



Principal Place of Business

3425 FORSYTH RD.  
WINTER PARK FL 32792

Mailing Address

3425 FORSYTH RD.  
WINTER PARK FL 32792

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1681880

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required



MOORE

CR2E037 (11/03)

6. Name and Address of Current Registered Agent

GALLATIN, DOROTHY D.  
630 STRATHMORE DRIVE  
ORLANDO FL 32803

7. Name and Address of New Registered Agent

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

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 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 PD ☐ Delete  
NAME GALLATIN, REVEREND DOROT  
STREET ADDRESS 630 STRATHMORE DR  
CITY-ST-ZIP ORLANDO FL

TITLE VTD ☐ Delete  
NAME GALLATIN, SUSAN  
STREET ADDRESS 5950 CYRILS DRIVE  
CITY-ST-ZIP SAINT CLOUD FL 34771

TITLE SD ☐ Delete  
NAME PARRIS, PAM  
STREET ADDRESS 2038 PLAZA TERRACE DRIVE  
CITY-ST-ZIP ORLANDO FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 3622 IBIS DR.  
CITY-ST-ZIP ORLANDO, FL 32803

TITLE ☐ Change ☒ Addition  
NAME DAVID BROWN  
STREET ADDRESS 639-121 LAUREL OAK LANE  
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701

TITLE ☐ Change ☒ Addition  
NAME DOROTHY BROWN  
STREET ADDRESS 639-121 LAUREL OAK LANE  
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 an other like empowered.

**SIGNATURE:** *Susan L. Gallatin* **SUSAN L. GALLATIN** 2 Feb. '04 407-671-2848  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #