2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725331

FILED Apr 15, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 35 S. OXFORD RD. ENGLEWOOD, FL 342950747 **Current Mailing Address: New Mailing Address:** PO BOX 747 ENGLEWOOD, FL 342950747 FEI Number: 23-7205680 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: BRADY, JAMES E 30 GRAND PALMS BLVD. ENGLEWOOD, FL 34223 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CEB () Change () Addition () Delete BRADY, JAMES Name: Name: 30 GRAND PALMS BLVD Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: EBM () Delete Title: () Change () Addition SIMMONS, LARRY B Name: Name: Address: 1215 MANASOTA BCH RD Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: EBM () Delete Title: **EBM** (X) Change () Addition GUNTHER, MILDRED BRADY, GRACE Name: Name: 8840 GILLARD AV. Address: Address: 30 GRAND PALMS BLVD. City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: ENGLEWOOD, FL 34223 Title: EBM () Delete Title: EBM (X) Change () Addition Name: SALINS, HELEN Name: BALLOU, FERN 38 NORTH EASTER ISLAND CIRCLE Address: Address: 6969 BARGELLO City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34224 Title: **EBM** () Delete Title: () Change () Addition VIRGO, LOIS Name: Name: 7 SAVONA AVENUE Address: Address: ENGLEWOOD, FL 34223 City-St-Zip: 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: JAMES E. BRADY CEB 04/15/2009