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May 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 729198 (2)
1. Corporation Name
RELIGIOUS SCIENCE OF THE PALM BEACHES, INC.



Principal Place of Business 13831 188TH PL N JUPITER FL 33478 US	Mailing Address P.O. BOX 33114 PALM BEACH GARDENS, FL 33420-3114
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3. Date Incorporated or Qualified 03/28/1974	
4. FEI Number 59-1531254	Applied For <input type="checkbox"/> Not Applicable
6. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**RODBER, JANE E.
13831 188TH PLACE NORTH
JUPITER FL 33478**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	JACOBS, DR. ALLAN	
STREET ADDRESS	16780 TEMPLE BLVD.	
CITY-ST-ZIP	LOXAHATCHEE FL	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	ERDEK, CAROL	
STREET ADDRESS	4332 CRESTDALE ST.	
CITY-ST-ZIP	PALM BEACH GARDENS FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BUNCH, SONIA	
STREET ADDRESS	1201 US HWY 1, #128	
CITY-ST-ZIP	NORTH PALM BEACH FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	RODBER, JANE	
STREET ADDRESS	13831 188TH PLACE NORTH	
CITY-ST-ZIP	JUPITER FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	RODBER, JOHN	
STREET ADDRESS	13831 188TH PLACE	
CITY-ST-ZIP	JUPITER FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Don Guest	
1.3 STREET ADDRESS	320 Kelsey Park Circle	
1.4 CITY-ST-ZIP	Palm Beach Gardens, FL 33410	
2.1 TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Candace Bennett	
2.3 STREET ADDRESS	320 Kelsey Park Circle	
2.4 CITY-ST-ZIP	Palm Beach Gardens FL 33410	
3.1 TITLE	Jackie Stackman	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS	500 Executive Court Drive # K-3	
3.4 CITY-ST-ZIP	West Palm Beach, FL 33401	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	D.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Barbara Rasp	
6.3 STREET ADDRESS	1703 WaterView Circle	
6.4 CITY-ST-ZIP	Palm Springs FL 33461	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* Jane E. Rodber 4/27/98 5615959050

CR2E037 (10/97)