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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 729228

1. Corporation Name
CHURCH OF CHRIST JESUS AND MARY BAKER EDDY CHRISTIAN SCIENCE, INC.

Principal Place of Business
 1000 LAKE OF THE WOODS BLVD
 UNIT B-102
 FERN PARK FL 32730
 US

Mailing Address
 P. O. BOX 27539
 DENVER CO 80227
 US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/02/1974	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2363898	Applied For No: Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
GRABLE, DOUGLAS L 1000 LAKE OF THE WOODS BLVD UNIT B-102 FERN PARK FL 32730				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 Douglas L. Grable April 23, 1999
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRABLE, DOUGLAS LEE	1.2 NAME	
STREET ADDRESS	1000 LAKE OF THE WOODS BLVD, UNIT B-102	1.3 STREET ADDRESS	
CITY-ST-ZIP	FERN PARK FL 32730	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HINSON, DONALD J.	2.2 NAME	
STREET ADDRESS	4677 SOUTH ADOBE WAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	LITTLETON CO 80127	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LARKIN, STANLEY C	3.2 NAME	
STREET ADDRESS	8815 W. CORNELL PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKEWOOD CO 80227	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RACICOT, MARGARET	4.2 NAME	
STREET ADDRESS	8111 W EASTMAN PL #5204	4.3 STREET ADDRESS	8111 W. Eastman Place, #5-204
CITY-ST-ZIP	LAKEWOOD CO 80227	4.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAITE, GARI	5.2 NAME	
STREET ADDRESS	142 SAGEBRUSH ST.	5.3 STREET ADDRESS	
CITY-ST-ZIP	GOLDEN CO 80401	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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, with all other like empowered.

SIGNATURE: Douglas L. Grable April 23, 1999 303-989-9398
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)