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Jun 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 730407 (4)

1. Corporation Name
FIRST CHURCH OF CHRIST, SCIENTIST, JUPITER-TEQUE STA, FLORIDA, INC.



Principal Place of Business 75 E. INDIANTOWN ROAD. #502 CONCOURSE VILLAGE SHOPPING CENTER JUPITER FL 33477	Mailing Address 75 E. INDIANTOWN ROAD. #502 CONCOURSE VILLAGE SHOPPING CENTER JUPITER FL 33477-5019
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3. Date Incorporated or Qualified 08/09/1974	3a. Date of Last Report 03/28/1996
4. FEI Number 59-1572477	Applied For <input type="checkbox"/> Not Applicable
5. 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" 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

**RICE, JEANETTE C
6564 C, CHASEWOOD DR. N.
JUPITER FL 33458**

10. Name and Address of New Registered Agent

81 Name MARTINELLO, MARY
82 Street Address (P.O. Box Number is Not Acceptable) 12698 SE Cascades Crt.
83
84 City Hobe Sound **85** FL **Zip Code** 33455

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 Mary Martinello DATE 6/22/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	C <input checked="" type="checkbox"/> DELETE
NAME	STILWELL, CONSTANCE
STREET ADDRESS	100 WATERWAY RD. 105-A
CITY-ST-ZIP	TEQUESTA FL 33469
TITLE	VC <input type="checkbox"/> DELETE
NAME	JAMES, MARGARET,
STREET ADDRESS	3322 CASSEEKEY
CITY-ST-ZIP	JUPITER FL 33477
TITLE	T <input checked="" type="checkbox"/> DELETE
NAME	MAJ. GEN. THOMAS EVANS
STREET ADDRESS	8801 SE RIVERFRONT TERR
CITY-ST-ZIP	TEQUESTA FL 33469
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	RICE, JEANETTE
STREET ADDRESS	6564-C CHASEWOOD N.
CITY-ST-ZIP	JUPITER FL 33458
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	MORRISON, KATHERINE
STREET ADDRESS	23 C TURTLE CREEK RD
CITY-ST-ZIP	TEQUESTA FL 33469
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Chairman <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	COULTER, JEANNE
1.3 STREET ADDRESS	19900 Beach Road, Apt. #704
1.4 CITY-ST-ZIP	Tequesta, FL 33469
2.1 TITLE	Vice Chairman <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	RICE, JEANETTE C.
2.3 STREET ADDRESS	6564-C Chasewood North
2.4 CITY-ST-ZIP	Jupiter, FL 33458
3.1 TITLE	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	TAYLOR, SHIRLEY
3.3 STREET ADDRESS	10436 SE Silver Palm
3.4 CITY-ST-ZIP	Tequesta, FL 33469
4.1 TITLE	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	MARTINELLO, MARY
4.3 STREET ADDRESS	12698 SE Cascades Crt.
4.4 CITY-ST-ZIP	Hobe Sound, FL 33455
5.1 TITLE	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	CURTIS, ELAINE
5.3 STREET ADDRESS	529 E. Whitney Circle
5.4 CITY-ST-ZIP	Jupiter, FL 33458
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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.

CR2E037 (9/96)