

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90043 006 ****61.25

DOCUMENT # 730407
 1. Entity Name
FIRST CHURCH OF CHRIST, SCIENTIST, JUPITER-TEQUE

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
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-1572477	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
~~RICE, JEANETTE C.
 6564 CHASEWOOD DR N
 #C
 JUPITER FL 33458~~

7. Name and Address of New Registered Agent
 Name: Mary Martinello
 Street Address (P.O. Box Number is Not Acceptable): 12698 S.E. Cascades Court
 City: Hobe Sound FL Zip Code: 33455

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.

SIGNATURE: Mary Martinello Mary Martinello, Secy, 4-25-01
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	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE	C	<input checked="" type="checkbox"/> Delete
NAME	COULTER, JEANNE	
STREET ADDRESS	1990 BEACH ROAD, APT #704	
CITY-ST-ZIP	TEQUESTA FL	
TITLE	C	<input checked="" type="checkbox"/> Delete
NAME	RICE, JEANETTE C	
STREET ADDRESS	6564-C CHASEWOOD NORTH	
CITY-ST-ZIP	JUPITER FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STANLEY, MARY-JUNE	
STREET ADDRESS	2555 P.B.G. BLVD	
CITY-ST-ZIP	PALM BEACH GARDENS FL	
TITLE	VC	<input checked="" type="checkbox"/> Delete
NAME	TARBOTON, KEN	
STREET ADDRESS	4681 LAKESIDE CIRCLE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CURTIS, ELAINE	
STREET ADDRESS	529 E WHITNEY CIRCLE	
CITY-ST-ZIP	JUPITER FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MASSEY, MINIVAN	
STREET ADDRESS	210 FAIRWAY W	
CITY-ST-ZIP	TEQUESTA FL 33469	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dingwell, Randolph	
STREET ADDRESS	13443 W Indolfer Way	
CITY-ST-ZIP	Palm Beach Gardens, FL 33418	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mary Martinello Mary	
STREET ADDRESS	12698 S.E. Cascades Court	
CITY-ST-ZIP	Hobe Sound, FL 33455	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Teuteberg, Karen	
STREET ADDRESS	7 Garden St, I-204	
CITY-ST-ZIP	Tequesta, FL 33469	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Joanne Ferguson Joanne	
STREET ADDRESS	173 Jones Creek Dr,	
CITY-ST-ZIP	Jupiter, FL 33458	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Heil, Phyllis	
STREET ADDRESS	1004 Tenth Court	
CITY-ST-ZIP	Palm Beach Gardens, FL 33410	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Taylor, Shirley	
STREET ADDRESS	10436 S.R. Silver Palm	
CITY-ST-ZIP	Tequesta FL 33469	

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 all other like empowered.

SIGNATURE: Mary Martinello Mary Martinello 4-25-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)