2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #730407

1. Entity Name



FILED May 02, 2008 8:00 am Secretary of State

05-02-2008 90158 009 ****61.25

	HURCH OF CHRIST, SCIEN -TEQUESTA, FLORIDA, IN								
	ITOWN ROAD, #502 Village Shopping Center	Mailing Address 75 E. INDIANTOWN ROA CONCOURSE VILLAGE S JUPITER, FL 33477		ER,	! 	ATTHE BE NER 41.0 74 522 14 A		III II AIBH BHAIL BH	i (4 4) e i 444
2. Principal P	Mace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			04292008	Chg-NP	CR2E	037 (12/06)	
City & Stat	е	City & State			4. FEI Number 59-1572			<u> </u>	pplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate o	of Status Desired		\$8.75 Ad Fee Require	
_	6. Name and Address of Current	Registered Agent			7. Name and /	Address of New	Registered	Agent	
GRAY, NA	NCY		Name						
	NTOWN RD 502		Street	Address (P.O. Box Number	r is Not Acceptal	ble)		
			City					7:- 0:-	4-
							FI		
	named entity submits this statement for tions of registered agent.	or the purpose of changing its	registered office	or register	ed agent, or both	n, in the State of	Florida. I am	n familiar with	, and accept
:									
SIGNATURE									
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent sign	nature required	when reinstating)		DATE		
SIGNATURE	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1,2008	· · · · · · · · · · · · · · · · · · ·	npaign Financing		\$5.00 May Be Added to Fees	FI	Make chec	ck payable t	
	Filling Fee is \$61.25 Due by May 1, 2008	9. Election Can Trust Fund C	npaign Financing	' o	\$5.00 May Be	FI	Make chec orida Depa	ertment of S	itate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: