


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 8:00 am
Secretary of State

03-28-2008 90025 016 ****61.25

DOCUMENT # 732269 1. Entity Name FIRST CHURCH OF RELIGIOUS SCIENCE OF GREATER DAYTONA, INC.					
Principal Place of Business 1104 H BEVILLE RD. DAYTONA BEACH, FL 32114			Mailing Address 1104 H, BEVILLE RD. DAYTONA BEACH, FL 32114		
2. Principal Place of Business - No P.O. Box # 1124 H, BEVILLE RD		3. Mailing Address 1124 H, BEVILLE RD			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3007016	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VANCE, ROBERT O REV. 1 CIRCLE DR HOLLY HILL, FL 32117			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>Rev Robert O Vance</i> 3/18/08 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOWERY, JOANNE 1007 10 TH STREET DAYTONA BEACH, FL 32117	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MERRY, CAROL 162 E BAYWOOD SQ DAYTONA BEACH, FL 32119		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LOWERY, JOANNE 1007 10 TH STREET DAYTONA BEACH, FL 32117	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PALMATIER, ALICE 437 N. OLANDER AVE #3 DAYTONA BEACH, FL 32118		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COADY, SARAH 1260 VANDERBILT DR ORMOND BEACH, FL 32174	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VANCE, ROBERT O REV. 1 CIRCLE DR DAYTONA BEACH, FL 32117	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Y STEWART, ROBERT C, 126 BRANDY HILLS DR PORT ORANGE, FL 32129		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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: <i>REV. ROBERT O. VANCE</i> 3/18/08 252-2630 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone *</small>					