## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 745270**

FILED Jan 29, 2009 Secretary of State

Entity Name: FIRST CHURCH OF CHRIST, SCIENTIST, OF MIAMI, FLORIDA

**Current Principal Place of Business: New Principal Place of Business:** 

1836 BISCAYNE BLVD MIAMI, FL 33132

**Current Mailing Address: New Mailing Address:** 

1836 BISCAYNE BLVD MIAMI, FL 33132

FEI Number: 59-0720259 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUTTRELL, LARRY L 1836 BISCAYNE BLVD MIAMI, FL 33137

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:

Address:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

9212 N. E. 10TH AVE.

(X) Change ( ) Addition

COBT () Delete LUTTRELL, BEVERLY RODRIGUEZ, LORENZO Name: Name: 161 NE 50TH ST Address: 9212 N. E. 10TH AVE. Address: City-St-Zip: MIAMI, FL 33137 City-St-Zip: MIAMI SHORES, FL 33138

Title: VCBT Title: VCBT (X) Change ( ) Addition () Delete PERCAL, YDA Name: MORELL, HELEN Name: Address: 5825 COLLINS AVE Address: 1090 N. VENETIAN DR. City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI BEACH, FL 33139

Title: SBT () Delete Title: SBT (X) Change ( ) Addition THOMPSON, JUDITH THOMPSON, JUDITH Name: Name:

20251 N. E. 2ND AVE. APT 14 530 N. W. 190TH STREET Address: Address: City-St-Zip: MIAMI, FL 33179 City-St-Zip: MIAMI, FL 33169

Title: () Delete Title: (X) Change ( ) Addition

MORELL, HELEN Name: Name: AZEMAR, DANIEL 1090 N. VENETIAN DR. Address: Address: 9455 N. W. 36TH AVE. City-St-Zip: MIAMI, FL 33139 City-St-Zip: MIAMI, FL 33147

Title: ( ) Delete Title: (X) Change ( ) Addition

RODRIGUEZ,, LORENZO CALDERON, JORGE Name: Name:

1498 N. W. 15TH STREET APT. 508 City-St-Zip: MIAMI SHORES, FL 33138 City-St-Zip: MIAMI, FL 33125

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

SIGNATURE: LARRY L. LUTTRELL **CLER** 01/29/2009