


FILE NOW: FILING FEE IS \$61.25

FILED

**Apr 17 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 763304 (3)

1. Corporation Name
THE CHRISTIAN SCIENCE SOCIETY OF BONITA SPRINGS, FLORIDA, INCORPORATED



Principal Place of Business 13710 SOUTHAMPTON DRIVE BONITA SPRINGS FL 34135	Mailing Address 13710 SOUTHAMPTON DRIVE BONITA SPRINGS FL 34135
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3. Date Incorporated or Qualified
05/14/1982

4. FEI Number
59-6564990

Applied For	Not Applicable
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2. Principal Place of Business	2a. Mailing Address
21 11551 EAST TERRY STREET	2a 11551 EAST TERRY STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 BONITA SPRINGS, FL	26 BONITA SPRINGS, FL
Zip	Zip
24 34135	29 34135
Country	Country
25 USA	30 USA

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**LURVEY, ROBERT
13710 SOUTHAMPTON DRIVE
BONITA SPRINGS FL 34135**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DBC <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GILLESPIE, MICHAEL	1.2 NAME	
STREET ADDRESS	28750 MCLAUGHLIN BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL 34134	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARTWRIGHT, ELEANOR	2.2 NAME	DBC.
STREET ADDRESS	20800 WEDGEWOOD DRIVE #D401	2.3 STREET ADDRESS	SAME
CITY-ST-ZIP	BONITA SPRINGS FL 34135	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LURVEY, CHRISTINA	3.2 NAME	
STREET ADDRESS	13710 SOUTHAMPTON DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	3.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LURVEY, ROBERT	4.2 NAME	
STREET ADDRESS	13710 SOUTHAMPTON DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	D
STREET ADDRESS		5.3 STREET ADDRESS	STURM, PATRICIA
CITY-ST-ZIP		5.4 CITY-ST-ZIP	1208 I.B.E. DRIVE BONITA SPRINGS, FL 34135
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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.

SIGNATURE: **CHRISTINA LURVEY** *Christina Lurvey* 4/11/98 941-495-8576

CRE037 (10/97)