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Feb 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N07065 (8)
1. Corporation Name
FIRST UNITARIAN CHURCH OF PALM BEACH COUNTY, FLO
RIDA (UNITARIAN-UNIVERSALIST)

Principal Place of Business Mailing Address
635 PROSPERITY FARMS RD. N.PALM BCH. FL 33408
635 PROSPERITY FARMS RD. N.PALM BCH. FL 33408



2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

3. Date Incorporated or Qualified
01/11/1985
4. FEI Number 59-6162395 Applied For Not Applicable
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
HATZFELD, BARBARA
319 CLUB DRIVE
PALM BEACH GARDENS FL 33410

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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 *Barbara Hatzfeld* DATE 1/17/98

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	CHAPIN, A B	
STREET ADDRESS	607 PILOT RD	
CITY-ST-ZIP	N PALM BCH FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	CLEGG, RICK	
STREET ADDRESS	103 SANDPIPER CIRCLE	
CITY-ST-ZIP	JUPITER FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	RICHARDS, JOHN	
STREET ADDRESS	7210 CRYSTAL LAKE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	DT	<input checked="" type="checkbox"/> DELETE
NAME	SMITH-BENEDICT, SHARON	
STREET ADDRESS	83 LAKE ARBOR DRIVE	
CITY-ST-ZIP	PALM SPRINGS FL	
TITLE	DC	<input type="checkbox"/> DELETE
NAME	HATZFELD, BARBARA	
STREET ADDRESS	319 CLUB DRIVE	
CITY-ST-ZIP	PALM BEACH GARDENS FL	
TITLE	DV	<input checked="" type="checkbox"/> DELETE
NAME	WILSON, DICKIE	
STREET ADDRESS	118D LINDA LANE	
CITY-ST-ZIP	PALM BEACH SHORES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Assistant Treasurer
4.3 STREET ADDRESS	Paul Dudey
4.4 CITY-ST-ZIP	225 East Croton Ave. Apt 2 Lantana, FL 33462
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Vice President
6.3 STREET ADDRESS	Ric Blackwell
6.4 CITY-ST-ZIP	6187 Winding Lake Drive Jupiter, FL 33458

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: *Jan O. Quinn* TREASURER 1-15-98 5/11/93-11/1

CR2E037 (10/97)