2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **N97000005048** May 11, 2000 8:00 am Secretary of State FIRST CHURCH OF CHRIST, SCIENTIST, DELRAY BEACH, 05-11-2000 90313 031 ****61.25 Principal Place of Business Mailing Address 200 S.E. 7TH AVENUE 200 S.E. 7TH AVENUE DELRAY BEACH FL 33483-5241 **DELRAY BEACH FL 33483** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-0911445 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HARRIS, JEAN S. Street Address (P.O. Box Number is Not Acceptable) GIORDANO, IRENE 60 VENETIAN DR. #N303 1402 SW 27th Ave. **DELRAY BEACH FL 33483** Zip Code 33426 Boynton Beach, 3426-8045 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change **XX**Addition TITLE TITLE Delete NAME GIORDANO, IRENE Patricia G. Peaslee NAME STREET ADDRESS STREET ADDRESS 60 VENETIAN DR. #N303 820 Tangerine Way CITY-ST-7IP CITY-ST-7IP **DELRAY BEACH FL 33483** Gulf Stream, FL 33483 Change TITLE D XX Delete TIPLE Elizabeth A. Sligh NAME FOY, KATHLEEN NAME STREET ADDRESS 4475 N. Ocean Blvd. #405 STREET ADDRESS 1250 E. LANCEWOOD PLACE CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33445 Delray Beach, FL 33483 XX Addition Change TITLE XX Delete TITLE Jane O. Ryser --NAME BERRIE, CAROLE NAME 200 MacFarlane Dr. #802 6928 KINGSTON DR. STREET ADDRESS STREET ADDRESS CITY-ST-7IP Delray Beach, FL 33483 CITY-ST-ZIP LANTANA FL 33462 Change XX Addition ☐ Delete TITLE Fred M. Elworthy HARRIS, JEAN S. NAME NAME STREET ADDRESS STREET ADDRESS 1402 SW 27TH AVENUE 955 Greensward Lane CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33426-8045** Delray Beach, FL 33445 ☐ Change ☐ Addition XX Delete TITLE TITLE NAME NAME DALE, MADELINE 220 MACFARLANE DR. #706S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33483 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 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

with all other like empowered