


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90186 012 ****61.25

DOCUMENT # N97000005048

1. Entity Name
**FIRST CHURCH OF CHRIST, SCIENTIST, DELRAY BEACH,
FLORIDA, INC.**



Principal Place of Business
**200 S.E. 7TH AVENUE
DELRAY BEACH FL 33483**

Mailing Address
**200 S.E. 7TH AVENUE
DELRAY BEACH FL 33483**



XX CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip

4. FEI Number **59-0911445**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**HARRIS, JEAN S
1402 SW 27TH AVE.
BOYNTON BEACH FL 33426-8045**

7. Name and Address of New Registered Agent

Name **RICHARDSON, JOYCE**

Street Address (P.O. Box Number is Not Acceptable)
553 S.E. 27th Way #42B

City **Boynton Beach,**

State **FL** Zip Code **33435**

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 *Joyce Richardson* DATE **1/7/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME	D JOHNSON, GLORIA	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	2544 23 CRANBROOK	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE NAME	D SLIGH, ELIZABETH A	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	4475 N. OCEAN BLVD. #405	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE NAME	T RYSER, JANE O	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	200 MACFARLANE DR. #802	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE NAME	S GIORDANO, IRENE R	<input type="checkbox"/> Delete
STREET ADDRESS	400 SEASAGE DRIVE STE 304	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE NAME	D WANN, FRANCES	<input type="checkbox"/> Delete
STREET ADDRESS	2909 S OCEAN BLVD 1B	
CITY-ST-ZIP	HIGHLAND BEACH FL 33487	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	Board Chairman & D Richardson, Joyce	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	553 S.E. 27th Way #42B	
CITY-ST-ZIP	Boynton Beach, FL 33435	
TITLE NAME	T Irene Giordano, D.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	86 MacFarlane Dr #30	
CITY-ST-ZIP	Delray Beach, FL 33483	
TITLE NAME	D Pitman, Virginia	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	3997 N.W. 7th Ct.	
CITY-ST-ZIP	Delray Beach, FL 33445	
TITLE NAME	T Giordano, Irene R.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	86 MacFarlane Dr. #3C	
CITY-ST-ZIP	Delray Beach, FL 33483	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	Vice Chairman King, Anna Mae	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	400 Seasage Dr. #1006	
CITY-ST-ZIP	Delray Beach, FL 33483	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 617.07(5)(f), 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: *Joyce Richardson* DATE: **1/7/03** PHONE: **561-7525680**

CR2E037 (10/02)