

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 702253

**Entity Name:** FIRST CHURCH OF CHRIST, SCIENTIST, STUART,FLORIDA, INC.**FILED**  
**Mar 06, 2018**  
**Secretary of State**  
**CC3429783754****Current Principal Place of Business:**515 S. E. OCEAN BLVD  
STUART, FL 34994**Current Mailing Address:**515 S.E. OCEAN BLVD  
STUART, FL 34994 US**FEI Number: 59-2096064****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LOOSE, DORIS CLERK  
2138 S.W. IMPERIAL ST  
PORT SAINT LUCIE, FL 34987 US*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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	CHAIRMAN
Name	LOOSE, FRANK B.
Address	2138 S.W. IMPERIAL ST.
City-State-Zip:	PORT ST. LUCIE FL 34987
Title	D
Name	HAKOLA, MARY
Address	3738 S.E. DOUBLETON DRIVE
City-State-Zip:	STUART FL 34997
Title	D
Name	NEWVILLE, SANDRA
Address	2871 S.W. TORONADO TRAIL
City-State-Zip:	STUART FL 34997

Title	VC
Name	COWAL, CAROL
Address	3792 N.E. OCEAN BLVD. #214
City-State-Zip:	JENSEN BEACH FL 34957
Title	D.
Name	HUFFORD, GEOFF
Address	1933 N.W. 21ST TERR.
City-State-Zip:	STUART FL 33994

*I hereby 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 all other like empowered.*

**SIGNATURE: FRANKLIN B. LOOSE****CHAIRMAN****03/06/2018**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date