

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000002110

**Entity Name:** CHRISTIAN SCIENCE SOCIETY, RUSKIN-SUN CITY CENTER INC.

**FILED**  
**Jan 17, 2020**  
**Secretary of State**  
**6972691620CC**

**Current Principal Place of Business:**

1501 LA JOLLA AVENUE  
SHOUTHSHORE UNITED CHURCH OF CHRIST THE CHAPEL  
SUN CITY CENTER, FL 33573

**Current Mailing Address:**

PO BOX 5740  
SUN CITY CENTER, FL 33573 US

**FEI Number: 82-4577531**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

TENNISON, CLAUDIA L  
833 OAKMONT AVE  
SUN CITY CENTER, FL 33573 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 CHMN  
Name KUHN, DOROTHY  
Address 2511 LYNX RD  
City-State-Zip: SUN CITY CENTER FL 33573

Title TRES  
Name TENNISON, CLAUDIA  
Address 833 OAKMONT AVE  
City-State-Zip: SUN CITY CENTER FL 33573

Title CLK  
Name TENNISON, CLAUDIA L  
Address 833 OAKMONT AVE  
City-State-Zip: SUN CITY CENTER FL 33573--5138

*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: CLAUDIA L TENNISON**

**CLERK**

**01/17/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date