

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771274

FILED  
Apr 17, 2008  
Secretary of State

**Entity Name:** RELIGIOUS SCIENCE CHURCH OF MARION COUNTY AND SCIENCE OF MIND CENTER, INC.  
OAKBROOK LIFE ENRICHMENT CENTER

**Current Principal Place of Business:**

1009 N.E. 28TH AVENUE  
OCALA, FL 34470 US

**New Principal Place of Business:**

**Current Mailing Address:**

1009 N.E. 28TH AVENUE  
OCALA, FL 34470 US

**New Mailing Address:**

FEI Number: 59-2414466      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HOSTETLER, MARGARET C REV  
1009 N.E. 28TH AVE.  
OCALA, FL 34470 US

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

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

**OFFICERS AND DIRECTORS:**

Title: TR ( ) Delete  
Name: DENEU, SHEREE  
Address: 5431 NE 35TH ST LOT 52  
City-St-Zip: SILVER SPRINGS, FL 34488

Title: VT ( ) Delete  
Name: GRIMES, CINDY  
Address: 405 SE 51ST AVE  
City-St-Zip: OCALA, FL 34471

Title: TR ( ) Delete  
Name: ROBINSON, ANN  
Address: 2135 SE 178TH AVE  
City-St-Zip: SILVER SPRINGS, FL 34488

Title: P ( ) Delete  
Name: GEORGE, NICK  
Address: 4421 N.E. 11 ST.  
City-St-Zip: OCALA, FL 34470

Title: TR ( ) Delete  
Name: SCHNEIDER, MARILYN  
Address: 1810 A WEST GLENEAGLER ROAD  
City-St-Zip: OCALA, FL 34472

Title: S ( ) Delete  
Name: SJOGREN, CAROL  
Address: 7200 NW 137TH AVE  
City-St-Zip: MORRISTON, FL 32668

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: SCHNEIDER, MARILYN  
Address: 2701 NE 10 ST  
City-St-Zip: OCALA, FL 34470

Title: PR (X) Change ( ) Addition  
Name: GRIMES, CINDY  
Address: 405 SE 51ST AVE  
City-St-Zip: OCALA, FL 34471

Title: SEC (X) Change ( ) Addition  
Name: GREEN, KENNETH  
Address: 800 NE 50 AVE  
City-St-Zip: OCALA, FL 34470

Title: TREA (X) Change ( ) Addition  
Name: GEORGE, SHEILA  
Address: 4421 N.E. 11 ST.  
City-St-Zip: OCALA, FL 34470

Title: MEM (X) Change ( ) Addition  
Name: SANDS, DIANNE  
Address: 517 NE 9 ST, LOT 16  
City-St-Zip: OCALA, FL 34470

Title: MEM (X) Change ( ) Addition  
Name: RYAN, LYNDA  
Address: 19683 SW 93 LN  
City-St-Zip: DUNNELLON, FL 34432

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARGARET C. HOSTETLER

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

REV

04/17/2008

\_\_\_\_\_  
Date