

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# 771274

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: VP () Delete
Name: SCHNEIDER, MARILYN
Address: 2701 NE 10 ST
City-St-Zip: Ocala, FL 34470

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

Title: SEC () Delete
Name: GREEN, KENNETH
Address: 800 NE 50 AVE
City-St-Zip: Ocala, FL 34470

Title: TREA () Delete
Name: GEORGE, SHEILA
Address: 4421 N.E. 11 ST.
City-St-Zip: Ocala, FL 34470

Title: MEM () Delete
Name: SANDS, DIANNE
Address: 517 NE 9 ST. LOT 16
City-St-Zip: Ocala, FL 34470

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change () Addition
Name: SCHNEIDER, MARILYN
Address: 733 E FORT KING ST
City-St-Zip: Ocala, FL 34471

Title: MEM (X) Change () Addition
Name: LUCIUS, FRANK
Address: 13675 NE 238 CT
City-St-Zip: SALT SPRINGS, FL 32134

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

Title: MEM (X) Change () Addition
Name: PAGE, SHERRY
Address: 713 ORCHID ST
City-St-Zip: Lady Lake, FL 32159

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (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: KENNETH GREEN

Electronic Signature of Signing Officer or Director

TREA

04/14/2009

Date