

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704652

FILED
Apr 09, 2004
Secretary of State

Entity Name: FOREST HILLS CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

11723 N MARJORY AVE
TAMPA, FL 33612 US

New Principal Place of Business:

Current Mailing Address:

11726 N. OLA AVE
TAMPA, FL 33612 US

New Mailing Address:

FEI Number: 59-1886145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, WARD L
11726 N. OLA AVE
TAMPA, FL 33612 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: P () Delete
Name: HALL, WARD L. (REV.),
Address: 11726 OLA AVENUE
City-St-Zip: TAMPA, FL

Title: T () Delete
Name: MEREDITH, DOIY
Address: 14530 N. FLORIDA AVE.
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: WALKER, PETER
Address: 14808 LIVINGSTON AVE
City-St-Zip: LUTZ, FL 33559

Title: T () Delete
Name: WARD, MARLIN
Address: 11328 N. MARJORY AVE.
City-St-Zip: TAMPA, FL

Title: T () Delete
Name: HALL, THELMA
Address: 11726 N OLA AVE
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: REV/ WARD L. HALL

P

04/09/2004

Electronic Signature of Signing Officer or Director

Date