FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 717874

(2)

FILED
Jan 31 1996 8:00 am
Secretary of State

PRINC	ETON CHURCH OF THE I	NAZARENE, INC.		 	
Principal Place	e of Business	Mailing Address			8181 61811 81811 81811 81811 81811 81811 1881
24800 SW 134 AVE. P. O. BOX 4311 PO BOX 4311 HOMESTEAD FL 33092-43 HOMESTEAD FL 33032 US			43 11		
US	7 FL 33002	05		3. Date Incorporated or Qualified	3a. Date of Last Report
				01/13/1970	02/08/1995
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-6560211	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζιρ	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
24	25	29	30		Yes No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name		
UNDERWOOD, ALLAN			82 Street Addr	ess (P.O. Box Number is Not Acceptable	9)
21700 S.W. 157TH AVENUE				·	
GOULDS	S FL 33170		83		
			84 City		FL 85 Zip Code
l or registe	red agent, or both, in the State of Fic	rida. Such change was authorize	s, the above-named corpored by the corporation's boar	ration submits this statement for the purp rd of directors. I hereby accept the appoi	and of shanning its registered office
SIGNATURE	ith, and accept the obligations of, Se				
	Signature typed or printed name of registered ag-		E Registered Agent signature required		DATE
12. TITLE	TD OFFICERS A	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	
NAME	GIVENS, THOMAS W	Therese	11 TIFLE		☐ Change ☐ Addition
STREET ADDRESS	22190 SW 167 AVE		1.2 NAME		
	MIAMI FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	SD	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
NAME	BRIDGES, JOYCE				Change C Addition
STREET ADDRESS	23901 SW 157 AVE.		2 2 NAME		İ
	HOMESTEAD FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PCD	□DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME	SPEAR, JAMES W	Places	32 NAME		Change Addition
STREET ADDRESS	24821 SW 134TH AVE		3.3 STREET ADDRESS		
CITY-SI-ZIP	PRINCETON FL		34 CITY-ST-ZIP		
TITLE	TRD	DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME	WARD, THOMAS B JR.		4. 2 NAME		El cuming El Montion
STREET ADDRESS	8151 SW 203 ST.		4.3 STREET ADDRESS		1
CITY-ST-ZIP	MIAMI FL		4.4 CITY - ST- ZIP		
TITLE	uvu i L	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		El cumilo
STREET ADDRESS			5.3 STREET ADDRESS		ŀ
CITY - ST-ZIP					
TITLE		DELETE	54 CITY - ST - ZIP 61 TITLE		☐ Change ☐ Addition
NAME	Į		62 NAME		C change C Addition
STREET ADDRESS	•		6.3 STREET ADDRESS		
STORET ADDARDS	l .		■ na sineri Whhees i		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 13 if changed, or man attachment with an address.

6 4 CITY-ST-ZIP

SIGNATURE:

CHTY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICE OF DISJOHOR

26/95

305-258-3181