

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 21, 2008 08:00 AM
Secretary of State

DOCUMENT # 721774

1. Entity Name

LAUDERDALE MANORS CHURCH OF THE NAZARENE,
INC.



Principal Place of Business

1518 NW 15TH AVE.
FT. LAUDERDALE, FL 33311

Mailing Address

1518 NW 15TH AVE.
FT. LAUDERDALE, FL 33311

DO NOT WRITE IN THIS SPACE



01242008 No Chg-NP

CR2E037 (4/06)

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WALKER, BARRY
1619 NW 12TH AVE
FT. LAUDERDALE, FL 33311

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	WRIGHT, KARLENE
STREET ADDRESS	11192 NW 1ST PL
CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	D
NAME	WRIGHT, ROYSTON
STREET ADDRESS	7100 NW 21ST CT
CITY-ST-ZIP	SUNRISE, FL 33313
TITLE	T
NAME	TILLMAN, ANTOINETTE
STREET ADDRESS	8508 NW 57TH DR
CITY-ST-ZIP	CORAL SPRINGS, FL 33067
TITLE	D
NAME	RASBERRY, JEAN
STREET ADDRESS	16920 NE 6TH CT
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33162
TITLE	P
NAME	BOMPART, REV. CARL S.
STREET ADDRESS	1877 NW 96TH AVE
CITY-ST-ZIP	PLANTATION, FL 33322
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000833994
02/28/08-80034-023 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARL BOMPART 01-25-08 954-763-3404

Date

Daytime Phone #