

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747814

FILED
Apr 03, 2004
Secretary of State

Entity Name: NORTH MIAMI BEACH CHURCH OF THE NAZARENE

Current Principal Place of Business:

375 NE 164 TERR.
NO. MIAMI BCH., FL 33162

New Principal Place of Business:

16501 NE 4TH AVE
NO. MIAMI BCH., FL 33162

Current Mailing Address:

375 NE 164 TERR.
NO. MIAMI BCH., FL 33162

New Mailing Address:

FEI Number: 59-6560210 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MANGRU, SIMON D.
375 NE 164 TERRACE
NO. MIAMI BCH., FL 33162 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: SD () Delete
Name: MANGRU, THEODORE
Address: 2103 NW 184TH WAY
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: MONCRIEFFE, GLORIA
Address: 15510 NE 15 PLACE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D () Delete
Name: MONCRIEFFE DELORES,
Address: 310 NE 165TH STREET
City-St-Zip: N MIAMI BEACH, FL

Title: TD () Delete
Name: HIMMELSBACH, SHELDON
Address: 78 NW 106 STREET
City-St-Zip: MIAMI, FL 33150

Title: PD () Delete
Name: MANGRU, SIMON D.
Address: 375 NE 164 TERRACE
City-St-Zip: N. MIAMI BCH., FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: MURRAY, JASON
Address: 700 NW 214TH STREET APT 715
City-St-Zip: MIAMI, FL 33169

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: SIMON D MANGRU

PD

04/03/2004

Electronic Signature of Signing Officer or Director

Date