

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00216

FILED
Apr 12, 2004
Secretary of State

Entity Name: RIVERVIEW CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

10402 GIBSONTON DRIVE
10402 GIBSONTON DRIVE
RIVERVIEW, FL 33569 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 267
RIVERVIEW, FL 33568 US

New Mailing Address:

FEI Number: 59-2364069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONTI, FRANK
10509 ST. ROSE ST.
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

STINCHCOMB, BILL
9345 MATHOG RD
RIVERVIEW, FL 33569 US

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: BILL STINCHCOMB

04/12/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FALING, DONALD
Address: 9605 MATHOG RD.
City-St-Zip: RIVERVIEW, FL

Title: TD () Delete
Name: CONTI, LILLIAN C
Address: 10509 ST. ROSE CT
City-St-Zip: RIVERVIEW, FL 33569

Title: TD () Delete
Name: CONTI, FRANK
Address: 10509 ST. ROSE ST.
City-St-Zip: RIVERVIEW, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FALING, DONALD
Address: 9605 MATHOG RD.
City-St-Zip: RIVERVIEW, FL 33569

Title: TD (X) Change () Addition
Name: STINCHCOMB, BILL
Address: 9345 MATHOG RD.
City-St-Zip: RIVERVIEW, FL 33569

Title: TD (X) Change () Addition
Name: FLOREZ II, FRANK
Address: 12207 59-TH STREET, NORTH
City-St-Zip: TEMPLE TERRACE, FL 33617

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. DONALD N. FALING

PD

04/12/2004

Electronic Signature of Signing Officer or Director

Date