FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 9:5
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N15572 (3)

1. Corporation Name
WEST MELBOURNE CHURCH OF THE NAZARENE INC.

Principal Place of Business	Mailing Address
4031 AARORA RD. MELBOURNE FL 32935	1572 GARDNER DR. MELBOURNE FL 32935 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/23/1986
3a. Date of Last Report: 07/14/1994
4. FEI Number: 59-2588931 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business
21 4031 Aurora Rd.
22 Suite, Apt. #, etc.
23 City & State: Melbourne, FL
24 Zip: 32940 25 Country: USA

2a. Mailing Address
26 4031 Aurora Rd
27 Suite, Apt. #, etc.
28 City & State: Melbourne, FL
29 Zip: 32940 30 Country: USA

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

DEXTER-WRIGHT, DEEANNA
1766 BLUE BIRD COURT
MELBOURNE FL 32935

10. Name and Address of New Registered Agent

91 Name: Dee Anna Dexter-Wright
92 Street Address (P.O. Box Number is Not Acceptable): 2437 Coral Ridge Circle
93
94 City: Melbourne FL 95 Zip Code: 32935

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mail-in filing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	11 TITLE	DC ☑ Change ☐ Addition
NAME	BLANKENSHIP, JAKE	12 NAME	Blankenship, Jake
STREET ADDRESS	1572 GARDNER DR.	13 STREET ADDRESS	1104 [redacted] Arnold Dr
CITY ST ZIP	MELBOURNE FL 32935	14 CITY ST ZIP	Melbourne, FL 32935
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	HIGDON, DAVID	22 NAME	
STREET ADDRESS	5 EMERLAD ST.	23 STREET ADDRESS	
CITY ST ZIP	MELBOURNE FL 32904	24 CITY ST ZIP	
TITLE	D	31 TITLE	D ☑ Change ☐ Addition
NAME	DEXTER-WRIGHT, DEEANNA	32 NAME	Dexter-Wright, Dee Anna
STREET ADDRESS	475 S JOHN RODES BLVD	33 STREET ADDRESS	2437 Coral Ridge Circle
CITY ST ZIP	MELBOURNE FL	34 CITY ST ZIP	Melbourne, FL 32935
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

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)(i), 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dee Anna Dexter-Wright 5-1-95 407-952-3323
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0031956