

FILE NOW: FILING FEE IS \$61.25

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Mar 19 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N32141 (6)  
1. Corporation Name  
COMMUNITY CHURCH OF THE NAZARENE, INC.



Principal Place of Business Mailing Address  
10551 SKEWLEE ROAD THONOTOSASSA FL 33592 US  
10551 SKEWLEE ROAD THONOTOSASSA FL 33592-3101 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 05/05/1989	3a. Date of Last Report 02/08/1996
21	26	4. FEI Number 59-2944917	Applied For Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 City & State	28 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip	25 Country	29 Zip	30 Country
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent  
SPECK, JAMES K. R  
10551 SKEWLEE ROAD  
THONOTOSASSA FL 33592

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.  
SIGNATURE: James K. Speck Rev. James K. Speck 3-14-97  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	FLANDERS, BARBARA	
STREET ADDRESS	10002 N. 22ND ST.	
CITY-ST-ZIP	TAMPA FL	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	SPECK, JAMES K. R	
STREET ADDRESS	10551 SKEWLEE ROAD	
CITY-ST-ZIP	THONOTASASSA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BARNARD, SHIRLEY	
STREET ADDRESS	39426 CENTRAL AVENUE	
CITY-ST-ZIP	ZEPHYRHILLS FL	
TITLE	DST	<input checked="" type="checkbox"/> DELETE
NAME	BRANNEN, DONIA	
STREET ADDRESS	2604 E. KNIGHTS GRIFFIN ROAD	
CITY-ST-ZIP	PLANT CITY FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	DC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Speck, James K. R	
2.3 STREET ADDRESS	10549 Skewlee Road	
2.4 CITY-ST-ZIP	Thonotosassa FL 33592	
3.1 TITLE	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Barnard, Shirley	
3.3 STREET ADDRESS	39426 Central Avenue	
3.4 CITY-ST-ZIP	Zephyrhills FL 33540	
4.1 TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Donald Urbina	
4.3 STREET ADDRESS	7743 Shoupe Road	
4.4 CITY-ST-ZIP	Plant City FL 33565	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing 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: Rev James K Speck 3-14-97 (813) 987-4228  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0046631

CR2E037 (9/96)