FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N39026

(2)

NAPLES NEW HAITIAN CHURCH OF THE NAZARENE, INC.

Principal Place of Business		Mailing Address	Mailing Address			###
5073-5077 EAST TRAIL NAPLES FL 33962 US		5073-5077 EAST TRAIL NAPLES FL 33962 US	NAPLES FL 33962			
					 Date Incorporated or Qualified 06/06/1990 	3a. Date of Last Report 03/08/1996
2. Principal F	Place of Business	2a. Mailing Address	⊢		4. FEI Number 65-0214027	Applied For
Sulte, Apt.	#. etc.	Suite Ant # etc	Suite, Apt. #, etc.		03 02 14027	Not Applicable \$8.75 Additional
22		27	27		5. Certificate of Status Desired	Fee Required
City & State		City & Stato	City & Stato		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country Zip		Country		8. This corporation has liability for in	ntangible tax under s. 199.032,
24	25 29 9, Name and Address of Current Registered A		30			Yes No
	S' Harris Bills Modrass Of	Corrent Registered Agent	81	Name	10. Name and Address of New Reg	listered Agent
DALII	IEAN DEMAID					
PAUL, JEAN RENAUD 3100 BAILEY LANE			82	Street Add	ress (P.O. Box Number is Not Acceptable	θ)
NAPLES FL 33942			63			
			84	City		FL 85 Zip Code
11. Pursuant office or	to the provisions of Sections 6	317.0502 and 617.1508, Florida Statute	s, the above uthorized by	named corp	poration submits this statement for the pution's board of directors. I hereby accept	
agent. I a	am familiar with, and accept th	e obligations of, Section 617.0503, Flor	rida Statutes).	month board of directors. Thoraby accept	the appointment as registered
SIGNATURE	Signature, typed or printed name of regis	NOTE	- Ranjetared Ann	nt cionalius rocui	fred when reinstating)	DATE
12.		RS AND DIRECTORS	13.	ili signalure legui	ADDITIONS/CHANGES TO OFFICE	
TITLE	DV	DELETE	1.1 TITLE		7 SONIONO CONTROL OF CONTROL	Change Addition
NAME	DIEUJUST, RICOT		1.2 NAME			-
STREET ADDRESS	3100 BALLEY LANE		1.3 STREET	ADDRESS		
CITY-ST-ZIP	NAPLES FL		1.4 CITY - S	T-ZIP		
TITLE	DV	DELETE	2.1 TITLE			Change Addition
NAME	PAUL, JEAN E.		2.2 NAME			
STREET ADDRESS	5334 HOLLAND ST.		2.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL		2. d CiTY - S	ST- ZIP		
TITLE	PD FAND	DELETE	3.1 TITLE			Change Addition
NAME STREET ADDRESS	PAUL, JEAN R. 3100 BAILEY LANE		3.2 NAME			
	NAPLES FL		3.3 STREET			
CITY-ST-ZIP TITLE	IMPLEO PL			17- ZIP		Change Addition
NAME			4.1 TITLE 4. 2 NAME			Change Addition
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - S			
TITLE	DELETE		5.1 TITLE			Change Addition
NAME	AE (5.2 NAME			
STREET ADDRESS	T ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP	-ZIP DELETE		5.4 CITY-S	T-ZIP		
TITLE	ILE .		6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS	•	
CITY_ST_7IP			0.4.0074.00	7 340		

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 eath; 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.