

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 29 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N39026** (2)
1. Corporation Name
NAPLES NEW HAITIAN CHURCH OF THE NAZARENE, INC.



Principal Place of Business 5073-5077 EAST TRAIL NAPLES FL 33962 US		Mailing Address 5073-5077 EAST TRAIL NAPLES FL 33962 US		3. Date Incorporated or Qualified 06/06/1990	
2. Principal Place of Business 21 5073-77 EAST TRAIL Suite, Apt. #, etc.		2a. Mailing Address 2a. Same Suite, Apt. #, etc.		4. FEI Number 65-0214027 Applied For Not Applicable	
22 City & State 23 Naples Florida		27 City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 Zip 34113		28 Country Collier		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
25 Country		29 Country		7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No	
26 Country		30 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent PAUL, JEAN RENAUD 3100 BAILEY LANE NAPLES FL 33942		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DEJUST, RICOT 3100 BAILEY LANE NAPLES FL ☒ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	D. Sone/ Colas ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PAUL, JEAN E. 5334 HOLLAND ST. NAPLES FL ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	D. JOHN KELLY PAUL ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PAUL, JEAN R. 3100 BAILEY LANE NAPLES FL ☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	D.S PAUL JOHN KELLY ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I 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: Paul Renaud **REQUIRED** 3-11-98 941/774-7224 941/774-9160

CR2E037 (10/97)