

FILE NOW: FILING FEE IS \$61.25

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Mar 14 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 # N45096 (7)  
1. Corporation Name  
PALM BEACH BOULEVARD CHURCH OF THE NAZARENE, INC



Principal Place of Business Mailing Address  
POST OFFICE BOX 50579 FT. MYERS FL 33905 POST OFFICE BOX 50579 FT. MYERS FL 33994-0579

3. Date Incorporated or Qualified 09/12/1991 3a. Date of Last Report 04/26/1996

21	2. Principal Place of Business	2a. Mailing Address	26	4. FEI Number	59-2088195	Applied For	
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.	27	5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required	
23	City & State	City & State	28	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees	
24	Zip	Country	29	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LINDSAY, RODNEY 4630 PALM BEACH BLVD FORT MYERS FL 33905				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 \_\_\_\_\_ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	RODNEY	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LINDSEY, RODNEY			1.2 NAME			
STREET ADDRESS	4630 PALM BEACH BLVD.			1.3 STREET ADDRESS			
CITY-ST-ZIP	FT. MYERS FL			1.4 CITY-ST-ZIP			
TITLE	TD	CHAPMAN, LAUREL	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CHAPMAN, LAUREL			2.2 NAME			
STREET ADDRESS	13462 FERN TRAIL DR.			2.3 STREET ADDRESS			
CITY-ST-ZIP	N FT. MYERS FL			2.4 CITY-ST-ZIP			
TITLE	SD	DANIELS, JEAN	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DANIELS, JEAN			3.2 NAME			
STREET ADDRESS	156 OAK ST.			3.3 STREET ADDRESS			
CITY-ST-ZIP	LABELLE FL			3.4 CITY-ST-ZIP			
TITLE			<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE			<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE			<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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 or 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.

RODNEY LINDSAY

CR2E037 (9/96)