

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747802

FILED  
Mar 26, 2004  
Secretary of State

Entity Name: GULFPORT CHURCH OF THE NAZARENE

**Current Principal Place of Business:**

1000-55TH STREET SOUTH  
GULFPORT, FL 33707

**New Principal Place of Business:**

1000-55TH STREET SOUTH  
GULFPORT, FL 33707

**Current Mailing Address:**

1000-55TH STREET SOUTH  
GULFPORT, FL 33707

**New Mailing Address:**

1000-55TH STREET SOUTH  
GULFPORT, FL 33707

FEI Number: 59-1696007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COUCHMAN, KENNETH L REV  
5401 17TH AVENUE SOUTH  
GULFPORT, FL 33707 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BARRICELLA, LORRAINE  
Address: 5417 JERSEY AVE SOUTH  
City-St-Zip: GULFPORT, FL 33707

Title: TT ( ) Delete  
Name: GROSSO, MARIE  
Address: 5405 11TH AVE SOUTH  
City-St-Zip: GULFPORT, FL 33707

Title: T ( ) Delete  
Name: PEPPER, JEANETTE  
Address: 250 58TH STREET NORTH #212  
City-St-Zip: ST PETERSBURG, FL 33710

Title: D ( ) Delete  
Name: PAULEY, RUTH ANN  
Address: 4840 HARDING ROAD  
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: P ( ) Delete  
Name: COUCHMAN, JENNIFER  
Address: 5401 17TH AVE SOUTH  
City-St-Zip: GULFPORT, FL 33707

Title: P ( ) Delete  
Name: COUCHMAN, KENNETH  
Address: 5401 17TH AVE SOUTH  
City-St-Zip: GULFPORT, FL 33707

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH L. COUCHMAN

P

03/26/2004

Electronic Signature of Signing Officer or Director

Date