## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 707950** 

FILED Mar 22, 2006 Secretary of State

Entity Name: BRANDON CHURCH OF THE NAZARENE, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

114 N KINGSWAY RD BRANDON, FL 33510

Current Mailing Address: New Mailing Address:

114 N KINGSWAY RD BRANDON, FL 33510

FEI Number: 59-6537856 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BAGBY, LARRY

1108 RIFLECREST AVE

VALRICO, FL 33594 US

BAGBY, LARRY

1438 EMERALD HILL WAY

VALRICO, FL 33594 US

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: WILLIAM L. BAGBY 03/22/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: TD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MARONEY, KEN
 Name:

 Address:
 1719 OPEN FIELD LOOP
 Address:

 City-St-Zip:
 BRANDON, FL 33510
 City-St-Zip:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 WILLIAMS, DONALD W
 Name:
 WILLIAMS, DONALD W

 Address:
 1417 PEACHFIELD DR.
 Address:
 1417 PEACHFIELD DR.

 City-St-Zip:
 VALRICO, FL
 City-St-Zip:
 VALRICO, FL
 33594

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition

 Name:
 BAGBY, LARRY
 Name:
 BAGBY, LARRY

 Address:
 1108 RIFLECREST AVE
 Address:
 1438 EMERALD HILL WAY

 City-St-Zip:
 VALRICO, FL 33594
 City-St-Zip:
 VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DONALD W. WILLIAMS PD 03/22/2006