

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725520

FILED  
Apr 04, 2006  
Secretary of State

Entity Name: VENICE CHURCH OF THE NAZARENE INC

## Current Principal Place of Business:

1535 E. VENICE AVE.  
VENICE, FL 34292

## New Principal Place of Business:

## Current Mailing Address:

1535 E. VENICE AVE.  
VENICE, FL 34292

## New Mailing Address:

FEI Number: 59-1582443

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DAVID SHORE  
1535 E. VENICE AVE.  
VENICE CHURCH OF THE NAZARENE  
VENICE, FL 33592 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: CD ( ) Delete  
Name: SMITH, CHARLES  
Address: 567 SILK OAK DRIVE  
City-St-Zip: VENICE, FL 34293

Title: C ( ) Delete  
Name: MAHLER-BENSON, JOY  
Address: 2313 GOYA DR.  
City-St-Zip: NOKOMIS, FL 34275

Title: C ( ) Delete  
Name: WILSON, DALE  
Address: 754 POND LILY WAY  
City-St-Zip: VENICE, FL 34293

Title: CT ( ) Delete  
Name: OLIN, RICHARD  
Address: 232 GREEN COVE RD  
City-St-Zip: VENICE, FL 34292

Title: SD ( ) Delete  
Name: CONGDON, ESTHER  
Address: 534 AMBERJACK DRIVE  
City-St-Zip: NORTH PORT, FL 34287

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: C (X) Change ( ) Addition  
Name: NICKERSON, WILLIAM  
Address: 4248 WORDSWORTH  
City-St-Zip: VENICE, FL 34293

Title: C (X) Change ( ) Addition  
Name: CASTLE, EVERETT  
Address: 808 BAVENO  
City-St-Zip: ENGLEWOOD, FL 34292

Title: CT (X) Change ( ) Addition  
Name: OLIN, RICHARD  
Address: 530 WALNUT CIRCLE  
City-St-Zip: VENICE, FL 34285

Title: SD (X) Change ( ) Addition  
Name: WAMPLER, DAVID  
Address: PO BOX 506  
City-St-Zip: ENGLEWOOD, FL 34292

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: DAVID SHORE

PRES

04/04/2006

Electronic Signature of Signing Officer or Director

Date