

FILE NOW: FILING FEE IS \$61.25

FILED

May 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 704110 (6)
1. Corporation Name
DISTRICT ADVISORY BOARD OF THE FLORIDA DISTRICT
CHURCH OF THE NAZARENE

Principal Place of Business P.O. BOX 5680 LAKELAND FL 33807-5680	Mailing Address P.O. BOX 5680 LAKELAND FL 33807-5680
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3. Date Incorporated or Qualified 05/28/1962	3a. Date of Last Report 02/19/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 59-0917278 Applied For Not Applicable	5. Certificate of Status Desired \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DENNIS, LARRY D.
4777 LAKELAND HIGHLANDS ROAD
LAKELAND FL 33813

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 FL	86 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	DENNIS, LARRY D.	1.2 NAME	
STREET ADDRESS	4777 LAKELAND HIGHLANDS ROAD	1.3 STREET ADDRESS	
CITY - ST - ZIP	LAKELAND FL	1.4 CITY - ST - ZIP	
TITLE	TD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	DAVIS, CHARLES	2.2 NAME	
STREET ADDRESS	1400 S. LAKE ELBERT DR.	2.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER HAVEN FL	2.4 CITY - ST - ZIP	
TITLE	PD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	FULLER, GENE	3.2 NAME	
STREET ADDRESS	4720 CLEVELAND HTS. BLVD.	3.3 STREET ADDRESS	
CITY - ST - ZIP	LAKELAND FL	3.4 CITY - ST - ZIP	
TITLE	D ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	LEONARD, LARRY W	4.2 NAME	
STREET ADDRESS	5614 CRAINDALE AV	4.3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL	4.4 CITY - ST - ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	HALLUM, FRANK	5.2 NAME	
STREET ADDRESS	2850 JAY JAY ROAD	5.3 STREET ADDRESS	
CITY - ST - ZIP	TITUSVILLE FL	5.4 CITY - ST - ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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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 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:

Gene Fuller

Gene Fuller

May 13, 1997 941-644-9331

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0052873