FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1. Cornoration	MENT # 70458	3 7 (5)			
•	CH OF THE NAZARENE O	F FT. PIFROF, FI A., INC.			
0110110		THE TIETOE, TEN, 1110			NI Gre in B arin Ale n Bi e n 1881
Principal Place	a of Business	Mailing Address			HI DION GION THAN OLD HEAL
		611 GARDENIA AVENUE		3. Date Incorporated or Qualified	
		FORT PIERCE FL 34982		10/02/1962	
				4. FEI Number	Applied For
	·			59-1572943	Not Applicable
	lace of Business	28. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional
Sulte, Apt.	#. etc.	Suite, Apt. #, etc.		6. Election Campaign Financing	Fee Required \$5.00 May Be
22	-,	27		Trust Fund Contribution	Added to Fees
City & State	•	City & State		7. Is this nonprofit corporation a homeowners	
23		28			X) No
Zip	Country	Zip 3	Country	This corporation owes or has pald the curl Personal Property Tax due June 30.	rent year Intangible ☐ Yes
24 25 29 30 9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
81 Name					
GOODRICH, MERLE J.			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
1907 YORK COURT				11 Gardenia Ave	
FT PIERCE FL 34982			83		
			84 City F	T. Pierce FL	85 Zip Code
11. Pursuant to the provision of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corpor				corporation submits this statement for the purpose of	changing its registered
Pursuant to the provision of Section 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	1 Well Vande	/ / / /	leawood - Post		98
	Significant, typed or printed hame of registered a	pent and title applicable (NOTE:	Registered Agent signature r	equired when reinstating) DATE	BIDEOTORO IN 40
12.	PCD OFFICERS AF	ND DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	GOODRICH, MERLE J.	A	1.2 NAME	Tal Underwood	20 01011 9 0
STREET ADDRESS	507 GARDENIA AVE		1.3 STREET ADDRESS	611 Gardenia five	
CITY-ST-ZIP	FT PIERCE FL				
TITLE			1.4 CITY - ST - ZIP	FT. Pierce, F1 34982	
	1	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	611 Gardenia Ave FT. Pierce, F1 34982	☐ Change ☐ Addition
NAME	TUCKER, JOANNE	DELETE		FT. Pierce, F1 34982	☐ Change ☐ Addition
STREET ADDRESS	808 AZALEA AVENUE	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	Ft. Pierce, F1 34982	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP	808 AZALEA AVENUE FT. PIERCE FL	_	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Ft. Pierce, F1 34982	
STREET ADORESS CITY-ST-ZIP TITLE	808 AZALEA AVENUE FT. PIERCE FL D	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE	Ft. Pierce, F1 34982	☐ Change ☐ Addition
STREET ADORESS CITY-ST-ZIP TITLE MAME	808 AZALEA AVENUE FT. PIERCE FL D LEMONDE, DONALD	_	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-S1-ZIP 3.1 TITLE 3.2 NAME	Ft. Pierce, F1 34982	
STREET ADORESS CITY-ST-ZIP TITLE	808 AZALEA AVENUE FT. PIERCE FL D LEMONDE, DONALD 117 SW FAIRVIEW AVE	_	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE	Ft. Pierce, F1 34982	
STREET ADDRESS CITY-ST-ZIP TITLE MARKE STREET ADDRESS	808 AZALEA AVENUE FT. PIERCE FL D LEMONDE, DONALD	_	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	5 D	
STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP	808 AZALEA AVENUE FT. PIERCE FL D LEMONDE, DONALD 117 SW FAIRVIEW AVE PT ST LUCIE FL SD EDMONDS, RICHARD	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	5 D	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	808 AZALEA AVENUE FT. PIERCE FL D LEMONDE, DONALD 117 SW FAIRVIEW AVE PT ST LUCIE FL SD EDMONDS, RICHARD 10 PADRE LANE	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	SP Andy Wright 1020 NW Tuscony Dr.	☐ Change ☐ Addition
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14. | hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. | 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: C

FILED

Apr 28 1998 8:00am

Secretary of State

4-20-98 561-461-8496