FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 706067 (6)

1. Corporation Name

FIRST CHURCH OF THE NAZARENE OF HOLLY HILL, INC.

Principal Place of Business	Mailing Address
P.O. BOX 250603 HOLLY HILL FL 32125-0603	P.O. BOX 250603 HOLLY HILL, FL 32125-0603

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/22/1963
3a. Date of Last Report: 09/27/1994
4. FEI Number: 59-6543217 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22 1045 S. Nova Rd.	Suite, Apt. #, etc. 27
City & State 23 Ormond Beach, Fl.	City & State 28
Zip / Country 24 32117 / 25 Volusia	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

WILSON, AUDRY
1562 DAYTONA AVE
HOLLY HILL FL 32117

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when restating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	D ☒ Change ☐ Addition
NAME	DAVIS, HERMAN	12 NAME	Ollie Reynolds
STREET ADDRESS	110 S. KINGS RD	13 STREET ADDRESS	1049 Brentwood Apts. #606
CITY-ST-ZIP	ORMOND BEACH FL 32174	14 CITY-ST-ZIP	Daytona Beach, Fl. 32117
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	RAMEY, ALVA	22 NAME	
STREET ADDRESS	1116 GRANADA AVE	23 STREET ADDRESS	
CITY-ST-ZIP	HOLLY HILL FL 32117	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	D ☒ Change ☐ Addition
NAME	BARNARD, WESLEY	32 NAME	Audry Wilson
STREET ADDRESS	1841 S. SEAGRAVE	33 STREET ADDRESS	1562 Daytona Ave.
CITY-ST-ZIP	S DAYTONA FL 32219	34 CITY-ST-ZIP	Holly Hill, Fl. 32117
TITLE	PD	41 TITLE	☐ Change ☐ Addition
NAME	KINNETT, V. LEO	42 NAME	
STREET ADDRESS	77 BRANDY HILLS DRIVE	43 STREET ADDRESS	
CITY-ST-ZIP	PORT ORANGE FL 32119	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: V. Leo Kinnett V. Leo Kinnett 4/19/1995 904-788-2439
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL (BY OFFICER OR DIRECTOR) Date Daytime Phone #

003484