

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 711024

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** CHURCH OF THE NAZARENE OF SEBRING, INC.

**Current Principal Place of Business:**

420 S. PINE STREET  
SEBRING, FL 33870 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 372  
SEBRING, FL 33871 US

**New Mailing Address:**

**FEI Number:** 59-2944708

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NIXON, DAVID F  
2680 PLACID VIEW DRIVE  
LAKE PLACID, FL 33852 US

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

LAUVER, CHARLES R  
898 S. LAKE ANGELO DRIVE  
AVON PARK, FL 33825 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: CHUCK LAUVER

03/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: LAUVER, CHARLES  
Address: 898 S. LAKE ANGELO DRIVE  
City-St-Zip: AVON PARK, FL 33825 US

Title: SEC  
Name: SCOTT, NANCY  
Address: 3104 NOEL ROAD  
City-St-Zip: AVON PARK, FL 33825 US

Title: TRES  
Name: ESCOBAR, GAIL  
Address: 763 BAY STREET  
City-St-Zip: SEBRING, FL 33870 US

Title: DIR  
Name: DYE, LARRY  
Address: 433 FLORAL DRIVE  
City-St-Zip: SEBRING, FL 33876 US

I hereby 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 all other like empowered.

SIGNATURE: GAIL ESCOBAR

TRES

03/15/2011

Electronic Signature of Signing Officer or Director

Date