

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722131

FILED  
Apr 02, 2010  
Secretary of State

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

**Current Principal Place of Business:**

425 SW 28TH ST. - WOLFF ROAD  
OKEECHOBEE, FL 34974 US

**New Principal Place of Business:**

**Current Mailing Address:**

425 S.W. 28TH STREET - WOLFF ROAD  
OKEECHOBEE, FL 34974 US

**New Mailing Address:**

425 SW 28TH ST. - WOLFF ROAD  
OKEECHOBEE, FL 34974 US

**FEI Number:** 59-1988094

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORANVILLE, LOIS E REV.  
2427 SW 18TH CT  
OKEECHOBEE, FL 34974 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:** DIR  
**Name:** MORANVILLE, LOIS E REV.  
**Address:** 2427 SW 18TH CT  
**City-St-Zip:** OKEECHOBEE, FL 34974

**Title:** SEC  
**Name:** SMITH, II, LAWRENCE W MR  
**Address:** 2405 SW 3RD AVE  
**City-St-Zip:** OKEECHOBEE, FL 34974

**Title:** TREA  
**Name:** GOULD, CARMEN Y MRS  
**Address:** 1007 NW 7TH ST  
**City-St-Zip:** OKEECHOBEE, FL 34972

**Title:** TRST  
**Name:** DEJONG, SHIRLEY MRS  
**Address:** 2306 SE 31ST STREET  
**City-St-Zip:** OKEECHOBEE, FL 34974

**Title:** TR  
**Name:** GOULD, CLINT MR  
**Address:** 1007 NW 7TH STREET  
**City-St-Zip:** OKEECHOBEE, FL 34972

**Title:** TR  
**Name:** MARTIN, CLIFFORD MR  
**Address:** 13801 SE HWY 441  
**City-St-Zip:** OKEECHOBEE, FL 34974

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:** LOIS E MORANVILLE, REV

DIR

04/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date