

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 722450 (4)

1. Corporation Name

CENTRAL CHURCH OF THE NAZARENE OF ORLANDO, FLORIDA, INC.



Principal Place of Business: 300 E JACKSON STREET ORLANDO FL 32801 US  
Mailing Address: 401 E JACKSON STREET ORLANDO FL 32801-4507 US

3. Date Incorporated or Qualified: 01/14/1972  
3a. Date of Last Report: 04/26/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

4. FEI Number: 59-0838084  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing: \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes/No

9. Name and Address of Current Registered Agent: WEAVER, HOWARD, 400 EAST CHURCH ST., ORLANDO FL 32801  
10. Name and Address of New Registered Agent (81-85): WEVER, HOWARD, 401 E. Jackson St., Orlando, FL 32801

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: S	WEAVER, HOWARD 3537 ATLIN PLACE CR. ORLANDO FL	1.1 TITLE:	
NAME:		1.2 NAME:	
STREET ADDRESS:		1.3 STREET ADDRESS:	
CITY-ST-ZIP:		1.4 CITY-ST-ZIP:	
TITLE: P	LEONARD, LARRY W. 400 E CHURCH ST ORLANDO FL	2.1 TITLE:	X Change
NAME:		2.2 NAME:	
STREET ADDRESS:		2.3 STREET ADDRESS:	401 E. Jackson St.
CITY-ST-ZIP:		2.4 CITY-ST-ZIP:	Orlando, Fl 32801
TITLE: D	BOTT, WILLIAM 2605 NELA AVENUE ORLANDO FL	3.1 TITLE:	
NAME:		3.2 NAME:	
STREET ADDRESS:		3.3 STREET ADDRESS:	
CITY-ST-ZIP:		3.4 CITY-ST-ZIP:	
TITLE: T	HALL, MYRNA L 112 MILEHAM DRIVE ORLANDO FL	4.1 TITLE:	X Change
NAME:		4.2 NAME:	Mills, Tawanda
STREET ADDRESS:		4.3 STREET ADDRESS:	6016 Pitch Pine Dr.
CITY-ST-ZIP:		4.4 CITY-ST-ZIP:	Orlando, FL 32819
TITLE: D	BRANHAM, DONNA 109 HOLDERNESS DR ORLANDO FL	5.1 TITLE:	X Change
NAME:		5.2 NAME:	Jacobs, Carl
STREET ADDRESS:		5.3 STREET ADDRESS:	6167 Sands Pines Est. Blvd.
CITY-ST-ZIP:		5.4 CITY-ST-ZIP:	Orlando, FL 32819
TITLE: D	MILLS, GREG 6016 PITCHPINE ORLANDO FL	6.1 TITLE:	
NAME:		6.2 NAME:	
STREET ADDRESS:		6.3 STREET ADDRESS:	
CITY-ST-ZIP:		6.4 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)(k), 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: Howard E. Weaver (Signature) 5/16/96 356-6620  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)