

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 10, 2004
Secretary of State**

DOCUMENT# 722450

Entity Name: CENTER POINTE COMMUNITY CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

300 E JACKSON STREET
ORLANDO, FL 32801 US

New Principal Place of Business:

Current Mailing Address:

401 E JACKSON STREET
ORLANDO, FL 32801 US

New Mailing Address:

P.O. BOX 780725
ORLANDO, FL 32878 US

FEI Number: 59-0838084 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEAVER, HOWARD
401 E JACKSON ST.
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

WEAVER, HOWARD
P.O. BOX 780725
ORLANDO, FL 32878 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: _____ Date: 03/10/2004
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: WEAVER, HOWARD,
Address: 3537 GATLIN PLACE CIRCLE
City-St-Zip: ORLANDO, FL

Title: P () Delete
Name: MILLS, GREG N
Address: 401 E JACKSON ST
City-St-Zip: ORLANDO, FL 32801

Title: T () Delete
Name: BRENEMAN, CAROL
Address: 930 NORTHERN DANCER WAY #100
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Delete
Name: MYERS, DONALD
Address: 401 E JACKSON ST
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: TILLER, JOAN
Address: 401 E JACKSON
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GREG MILLS P 03/10/2004
Electronic Signature of Signing Officer or Director Date