## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#725520** 

PO BOX 506

ENGLEWOOD, FL 3429CASTL

Address:

City-St-Zip:

FILED Jan 10, 2007 Secretary of State

Entity Name: VENICE CHURCH OF THE NAZARENE INC

**Current Principal Place of Business: New Principal Place of Business:** 1535 E. VENICE AVE. VENICE, FL 34292 **Current Mailing Address: New Mailing Address:** 1535 E. VENICE AVE. VENICE, FL 34292 FEI Number: 59-1582443 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DAVID SHORE DAVID SHORE 1535 E. VENICE AVE. 1535 E. VENICE AVE. VENICE CHURCH OF THE NAZARENE VENICE CHURCH OF THE NAZARENE VENICE, FL 33592 US VENICE, FL 34292 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: 01/10/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition SMITH, CHARLES GABLE, TERRY Name: Name: 567 SILK OAK DRIVE Address: 255 GLEN OAK RD Address: City-St-Zip: VENICE, FL 34293 City-St-Zip: VENICE, FL 34293 Title: () Delete Title: () Change () Addition NICKERSON, WILLIAM Name: Name: Address: 4248 WORDSWORTH Address: City-St-Zip: VENICE, FL 34293 City-St-Zip: Title: () Delete Title: () Change () Addition CASTLE, EVERETT Name: Name: Address: 808 BAVENO Address: City-St-Zip: ENGLEWOOD, FL 34292 City-St-Zip: Title: CT () Delete Title: () Change () Addition OLIN, RICHARD Name: Name: 530 WALNUT CIRCLE Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: SD () Delete Title: () Change () Addition WAMPLER, DAVID Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: DAVID SHORE **PRES** 01/10/2007