

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90066 006 ****61.25

DOCUMENT # 725740

1. Entity Name
ST CLOUD CHURCH OF THE NAZARENE INC



Principal Place of Business
2176 MICHIGAN AVE.
P.O. BOX 535
ST. CLOUD, FL 34769-5214

Mailing Address
2176 MICHIGAN AVE.
P.O. BOX 535
ST. CLOUD, FL 34769-5214



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02092005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-6537872

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SARTIN, MYRON D.
2301 OAK WIND CT.
ST. CLOUD, FL 34772

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME SARTIN, MYRON D.
STREET ADDRESS 2301 OAK WIND CT.
CITY-ST-ZIP ST CLOUD, FL 00000, ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME VIZE, FERN
STREET ADDRESS 1380 TERRY LANE
CITY-ST-ZIP KISSIMMEE, FL 34744 ☒ Delete

TITLE S.
NAME Shirley Sussex
STREET ADDRESS 1844 Ashton Park Place (Ashton)
CITY-ST-ZIP St. Cloud, FL 34771 ☒ Change ☐ Addition

TITLE T
NAME GOOLSBY, PAT
STREET ADDRESS 6230 LAKE LIZZIE DRIVE
CITY-ST-ZIP ST. CLOUD, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME RICHARDS, BOB
STREET ADDRESS 5716 SWEETHEART CT
CITY-ST-ZIP SAINT CLOUD, FL 34772 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME VIZE, RICHARD
STREET ADDRESS 1380 TERRY LANE
CITY-ST-ZIP KISSIMMEE, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME KINNEY, LARRY
STREET ADDRESS 327 CAROLINA AVE
CITY-ST-ZIP SAINT CLOUD, FL 34769 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Myron D. Sartin
Myron D. Sartin

2-10-05 407-892-8184

Date

Daytime Phone #