2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728631

FILED Jan 22, 2007 Secretary of State

Entity Name: DISTRICT ADVISORY BOARD OF THE SOUTHERN FLORIDA DISTRICT, CHURCH OF THE

NAZARENE, INC.

Current Principal Place of Business: New Principal Place of Business:

2665 PLACID VIEW DR.

DIST, OFFICE

LAKÉ PLACID, FL 33852 US

Current Mailing Address: New Mailing Address:

3031 SW 21 CT

FORT LAUDERDALE, FL 33312 US

FEI Number: 59-1573589 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

NIXON, DAVID F NIXON, DAVID F

2685 PLACID VIEW DRIVE 2680 PLACID VIEW DRIVE LAKE PLACID, FL 33852 US LAKE PLACID, FL 33852 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: 01/22/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: () Change () Addition

 Name:
 WHITING, (WARREN),
 Name:

 Address:
 3031 SW 21 CT.
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 MOORE, DENNIS
 Name:

 Address:
 7515 SEABREEZE DR.
 Address:

 City-St-Zip:
 LAKE WORTH, FL 33467
 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 SPEAR, JAMES W
 Name:
 BUETTNER, BILL L

 Address:
 24800 SW 134 AVE
 Address:
 6100 BIRCHTREE TERR.

 City-St-Zip:
 PRINCETON, FL 33032
 City-St-Zip:
 LAKE WORTH, FL 33467

 $\label{eq:title:P} {\sf Title:} \qquad {\sf P} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf P} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 NIXON, DAVID F
 Name:
 NIXON, DAVID F

 Address:
 2685 PLACID VIEW DRIVE
 Address:
 2680 PLACID VIEW DRIVE

 City-St-Zip:
 LAKE PLACID, FL 33852
 City-St-Zip:
 LAKE PLACID, FL 33852

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.

SIGNATURE: WARREN WHITING TD 01/22/2007