

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# 728631

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

Current Principal Place of Business:

2680 PLACID VIEW DR
DIST, OFFICE
LAKE PLACID, FL 33852 US

New Principal Place of Business:

Current Mailing Address:

2680 PLACID VIEW DR
DIST, OFFICE
LAKE PLACID, FL 33852 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

NIXON, DAVID F
2680 PLACID VIEW DRIVE
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

NIXON, DAVID F
12 ACACIA CT S
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: _____ Date: 04/13/2009
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: RICE, PHIL W
Address: 3713 BAY CREEK DR
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SD () Delete
Name: MOORE, DENNIS
Address: 7515 SEABREEZE DR.
City-St-Zip: LAKE WORTH, FL 33467

Title: SD () Delete
Name: BUETTNER, BILL L
Address: 6100 BIRCHTREE TERR.
City-St-Zip: LAKE WORTH, FL 33467

Title: P () Delete
Name: NIXON, DAVID F
Address: 12 ACACIA CT S
City-St-Zip: LAKE PLACID, FL 33852

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: PAUL, JOHN K
Address: 4374 23RD AVE SW
City-St-Zip: NAPLES, FL 34116

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 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: DAVID F NIXON P Date: 04/13/2009
Electronic Signature of Signing Officer or Director