

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729959

FILED
Apr 22, 2009
Secretary of State

Entity Name: LEALMAN CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

3589-55TH AVENUE NORTH
ST. PETERSBURG, FL 33714

New Principal Place of Business:

Current Mailing Address:

3589-55TH AVENUE NORTH
ST. PETERSBURG, FL 33714

New Mailing Address:

FEI Number: 59-6537837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORTON, CAROL REV
3589 55TH AVE N
SAINT PETERSBURG, FL 33714 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NORTON, CAROL
Address: 3589 55TH CAROL
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: D () Delete
Name: PIERCE, CHARLOTTE
Address: 9320 52ND WAY N
City-St-Zip: PINELLAS PARK, FL 33781

Title: TR () Delete
Name: MARTIN, GARY
Address: 3589 65TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: T () Delete
Name: REESER, MICHELE
Address: 3584-55 AVE N
City-St-Zip: SAINT PETERSBURG, FL 33714

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:

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: CAROL NORTON

REV

04/22/2009

Electronic Signature of Signing Officer or Director

Date