

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729959

**FILED**  
**Apr 23, 2011**  
**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  
Name: NORTON, CAROL  
Address: 3589 55TH CAROL  
City-St-Zip: SAINT PETERSBURG, FL 33714

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: MICHELE REESER

T

04/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date