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Jan 16 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 730773 (9)

1. Corporation Name

NORTHSIDE COMMUNITY CHURCH OF THE NAZARENE, INC.



Principal Place of Business

Mailing Address

6781 BAYSHORE ROAD  
N FORT MYERS FL 33917  
US

6781 BAYSHORE ROAD  
N FT. MYERS FL 33917-3304  
US

3. Date Incorporated or Qualified  
09/24/1974

3a. Date of Last Report  
02/07/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number  
59-1577196

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PARKER, H. RUSSELL  
1303 SE 18TH STREET  
CAPE CORAL FL 33903

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  DELETE  
NAME PARKER, H. RUSSELL (REV)  
STREET ADDRESS 555 PINE ISLAND RD.  
CITY-ST-ZIP N. FT MYERS FL

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE VP  DELETE  
NAME PREDKO, BETTY  
STREET ADDRESS 160 DOW LA  
CITY-ST-ZIP N. FT MYERS FL

2.1 TITLE  Change  Addition  
2.2 NAME VP  
2.3 STREET ADDRESS Tony Cirer  
4104 se.20th.pl.  
2.4 CITY-ST-ZIP Cape Coral Fl. 33904

TITLE D  DELETE  
NAME BRUNET, DOROTHY  
STREET ADDRESS 1966 S. PINE DRIVE  
CITY-ST-ZIP FT. MYERS FL

3.1 TITLE  Change  Addition  
3.2 NAME D  
3.3 STREET ADDRESS Richard Dunmire  
506 Santa Barbra st.  
3.4 CITY-ST-ZIP No. Ft. Myers, Fl 33903

TITLE D  DELETE  
NAME COOLEY, PAUL  
STREET ADDRESS 1407 S E 30TH ST  
CITY-ST-ZIP CAPE CORAL FL

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME STALTER, MARY  
STREET ADDRESS 7536 SUNCOAST DRIVE  
CITY-ST-ZIP N FT MYERS FL

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE T  DELETE  
NAME BOGGS, HELEN  
STREET ADDRESS 2197 ZOYSIA LANE  
CITY-ST-ZIP N. FT. MYERS FL

6.1 TITLE  Change  Addition  
6.2 NAME T  
6.3 STREET ADDRESS Bea Lamb  
83 Gazelle Dr.  
6.4 CITY-ST-ZIP No. Ft. Myers, fl. 33917

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Rev. H. Russell Parker  
SIGNED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/96

Date

941-567-0009  
Daytime Phone # 0056910

CR2E037 (9/96)