

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746153

FILED
Feb 16, 2009
Secretary of State

Entity Name: UNITED CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

1320 S. CHICKASAW TRAIL
ORLANDO, FL 32825

New Principal Place of Business:

Current Mailing Address:

1320 S. CHICKASAW TRAIL
ORLANDO, FL 32825

New Mailing Address:

FEI Number: 59-1882975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, JOSEPH
1320 S CHICKASAW TRAIL
ORLANDO, FL 32825 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: T () Delete
Name: WILLIAMS, JOSEPH M.,
Address: 338 HAMMOCK DUNES PLACE
City-St-Zip: ORLANDO, FL 32828

Title: PD () Delete
Name: YATES, REV. ROBERT
Address: 1320 S CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32825

Title: T () Delete
Name: WILLIAMS, JOSEPH
Address: 338 HAMMOCK DUNES PL
City-St-Zip: ORLANDO, FL 32828

Title: S () Delete
Name: MARSHALL, DEB
Address: 20601 QUATERLY
City-St-Zip: ORLANDO, FL 32833

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PERDUE, SCOTT
Address: 1320 S. CHICKASAW TRAIL
City-St-Zip: ORLANDO, FL 32825

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: JOSEPH WILLIAMS

T

02/16/2009

Electronic Signature of Signing Officer or Director

Date