

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747626

FILED
Jul 26, 2004
Secretary of State

Entity Name: FERN PARK CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

141 O'BRIEN RD
FERN PARK, FL 32730

New Principal Place of Business:

Current Mailing Address:

141 O'BRIEN RD
FERN PARK, FL 32730

New Mailing Address:

FEI Number: 59-2080856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAIGO, G (GALEN) CRAIGO
600 FREYER DRIVE
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

CRAIGO, G (GALEN)
600 FREYER DRIVE
LONGWOOD, FL 32750 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: J GALEN CRAIGO

07/26/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KING, SCOTT A REV
Address: 1140 HOBSON ST
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: COLLIER, CAROLYN
Address: 109 MARK DAVID BLVD
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Delete
Name: CRAIGO, JAMES G,
Address: 600 FREYER DR
City-St-Zip: LONGWOOD, FL

Title: S () Delete
Name: CRAIGO, LOIS S,
Address: 600 FREYER DR
City-St-Zip: LONGWOOD, FL

Title: D () Delete
Name: HOSTETLER, SHIRLEY
Address: 302 BROADVIEW AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: CRAIGO, JAMES G,
Address: 600 FREYER DR
City-St-Zip: LONGWOOD, FL 32750

Title: S (X) Change () Addition
Name: CRAIGO, LOIS S,
Address: 600 FREYER DR
City-St-Zip: LONGWOOD, FL 32750

Title: D (X) Change () Addition
Name: HAUCK, ISABELLE
Address: 105 E COLEMAN CIR
City-St-Zip: SANFORD, FL 32773

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES G CRAIGO

D

07/26/2004

Electronic Signature of Signing Officer or Director

Date