

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01, 1999 8:00 am
Secretary of State

05-01-1999 90058 014 ****61.25

DOCUMENT # 748811

1. Corporation Name

EVANGEL TEMPLE CHURCH OF THE NAZARENE, INC.

Principal Place of Business

904 GRAND CAYMAN COURT
POB 585006 35858
ORLANDO FL 32835
US

Mailing Address

904 GRAND CAYMAN CT
POB 585006 32858
ORLANDO FL 32835
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

3. Date Incorporated or Qualified

09/05/1979

4. FEI Number

59-1882831

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

9. Name and Address of Current Registered Agent

COLEMAN, MARGARET J.
904 GRAND CAYMAN CT
ORLANDO FL 32835

10. Name and Address of New Registered Agent

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

HIRES, ROBERT L

STREET ADDRESS

4116 BRINNELL AVE

CITY-ST-ZIP

ORLANDO, FL 00000

TITLE

F

☐ DELETE

NAME

COLEMAN, MARGARET

STREET ADDRESS

904 GRAND CAYMAN COURT

CITY-ST-ZIP

ORLANDO FL 32835

TITLE

T

☐ DELETE

NAME

BELLAMY, BENNIE

STREET ADDRESS

4523 ARCH STREET

CITY-ST-ZIP

ORLANDO FL 32808

TITLE

T

☐ DELETE

NAME

SIMMONS, MARY F.

STREET ADDRESS

4117 KALWIT LANE

CITY-ST-ZIP

ORLANDO FL 32808

TITLE

T

☐ DELETE

NAME

INGRAM, FLORA N.

STREET ADDRESS

3721 WILTS STREET

CITY-ST-ZIP

ORLANDO FL 32805

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

Robert L. Hires
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT L. HIRES

4/15/99

(407) 299-4612

Date

Daytime Phone #

CR2E037 (11/98)

0018328