

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753994

FILED
Apr 14, 2009
Secretary of State

Entity Name: FIRST CHURCH OF THE NAZARENE OF TALLAHASSEE, FLORIDA, INC.

Current Principal Place of Business:

1983 MAHAN DR
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

1983 MAHAN DR
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-6543210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PURSELL, WILLIAM ESQ
1983 MAHAN DR
TALLAHASSEE, FL 32305 US

Name and Address of New Registered Agent:

PURSELL, WILLIAM ESQ
1983 MAHAN DR
TALLAHASSEE, FL 32308 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:

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DHANARAGAN, ZACHARIAH
Address: 1693 COPPERFIELD CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: SEIDEL, RICHARD
Address: 6885 GLENMEADOW LANE
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Delete
Name: MCKEE, BRIAN
Address: 3046 BANKS RD
City-St-Zip: TALLAHASSEE, FL 32309

Title: T () Delete
Name: THIGPEN, RUBY
Address: 335 OLD MAGNOLIA RD
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: P () Delete
Name: PULLEN, DAVID D
Address: 1983 MAHAN DR.
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PURSELL, WILLIAM
Address: 9884 DEER LAKE N
City-St-Zip: TALLAHASSEE, FL 32312

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

Title: D (X) Change () Addition
Name: MCCLELLAND, JANE
Address: 2016 CHOWKEEBIN NENE
City-St-Zip: TALLAHASSEE, FL 32301

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

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: DAVID D. PULLEN

REV

04/14/2009

Electronic Signature of Signing Officer or Director

Date