

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90201 022 ****70.00

DOCUMENT # 763356					
1. Entity Name LAKE CITY CHURCH OF THE NAZARENE, INC.					
Principal Place of Business 445 SW ALACHUA AVE. LAKE CITY, FL 32025 US			Mailing Address P.O. BOX 1063 LAKE CITY, FL 32056-1063 US		
2. Principal Place of Business 141 SW Azalea Park Place Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Lake City, Florida		City & State		4. FEI Number 59-6543220	
Zip 320255		Country USA		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent EVANS, MICHAEL H REV. 1169 SE MAGNOLIA LOOP LAKE CITY, FL 32025			7. Name and Address of New Registered Agent Name Harden, Donald B. Street Address (P.O. Box Number is Not Acceptable) 718 SE Margaret Drive City Lake City, FL Zip Code 32025		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Donald B. Harden</u> DATE 4/19/06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 15, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVANS, MICHAEL H REV. 1169 SE MAGNOLIA LOOP LAKE CITY, FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VANN, MARC 131 W DUVAL ST LAKE CITY, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HARDEN, DONALD 718 SE MARGARET DR LAKE CITY, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/T ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GREEN, WAYNE RT 9, BOX 2283 LAKE CITY, FL 32024	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Harden, Elaine 718 SE Margaret Drive Lake City, FL 32025	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Harden, Elaine 718 SE Margaret Drive Lake City, FL 32025	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Donald B. Harden</u>			Donald B. Harden		4/19/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		386-3975531 Daytime Phone