

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765794

FILED
Jul 01, 2009
Secretary of State

Entity Name: BELLEVIEW CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

6342 SE 123 LANE
BELLEVIEW, FL 34420 US

New Principal Place of Business:

6342 SE 123RD LANE
BELLEVIEW, FL 34420 US

Current Mailing Address:

6342 SE 123RD LANE
BELLEVIEW, FL 34420 US

New Mailing Address:

FEI Number: 59-1768085 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WATSON, JEREMY
6342 SE 123RD LANE
BELLEVIEW, FL 34420 US

Name and Address of New Registered Agent:

MONK, GARY W PASTOR
6272 SE 123RD LANE
BELLEVIEW, FL 34420 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: GARY W. MONK

07/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P (X) Delete
Name: WATSON, JEREMY
Address: 6343 SE 123RD LANE
City-St-Zip: BELLEVIEW, FL 34420 US

Title: T () Delete
Name: MAHOOD, BOB
Address: 2248 AVON LOOP
City-St-Zip: LADY LAKE, FL 32162

Title: T (X) Delete
Name: WATSON, STEPHANIE
Address: 6342 SE 123 LANE
City-St-Zip: BELLEVIEW, FL 34420 US

Title: T () Delete
Name: MILLER, MARY
Address: 7155 SE 119TH PLACE
City-St-Zip: BELLEVIEW, FL 34420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: MAHOOD, BOB TRUSTEE
Address: 2248 AVON LOOP
City-St-Zip: LADY LAKE, FL 32162

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

Title: STEW (X) Change () Addition
Name: MILLER, MARY STEWARD
Address: 7155 SE 119TH PLACE
City-St-Zip: BELLEVIEW, FL 34420

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: BOB MAHOOD

TRUS

07/01/2009

Electronic Signature of Signing Officer or Director

Date