

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855065

FILED
Mar 21, 2007
Secretary of State

Entity Name: GENERAL BOARD OF THE CHURCH OF THE NAZARENE, CORPORATION

Current Principal Place of Business:

6401 THE PASEO
KANSAS CITY, MO 64131

New Principal Place of Business:

Current Mailing Address:

6401 THE PASEO
KANSAS CITY, MO 64131

New Mailing Address:

FEI Number: 44-0552034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUCHANAN, JESSE L. DR.
11022 PANAMA DRIVE
TAMPA, FL 33625 US

Name and Address of New Registered Agent:

DENNIS, LARRY D DR.
4720 CLEVELAND HEIGHTS BLVD.
SUITE #303
LAKELAND, FL 33813 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: LARRY D. DENNIS

03/21/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DR () Delete
Name: DAVIS, CHARLES
Address: 110 COVINGTON COVE SOUTHEAST
City-St-Zip: WINTER HAVEN, FL 33880

Title: DR () Delete
Name: STONE, JACK
Address: 6401 THE PASEO
City-St-Zip: KANSAS CITY, MO 64131

Title: DR. () Delete
Name: MCCOOL, MARILYN
Address: 6401 THE PASEO
City-St-Zip: KANSAS CITY, MO 64131

Title: DR () Delete
Name: CALHOUN, JOHN H
Address: 1866 CLAYTON RD., STE 200
City-St-Zip: CONCORD, CA 945202505

Title: DR () Delete
Name: BOWLING, JOHN
Address: ONE UNIVERSITY AVENUE
City-St-Zip: BOURBONNAIS, IL 609142271

Title: DR. () Delete
Name: LEE, TED R
Address: 10616 E 700 S
City-St-Zip: CAMBY, IN 46113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: DAVIS, CHARLES
Address: 427 RUBY LAKE PLACE
City-St-Zip: WINTER HAVEN, FL 33884

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

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

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

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 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: JACK STONE

DR.

03/21/2007

Electronic Signature of Signing Officer or Director

Date