2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004
Secretary of State

DOCUMENT# N01000001203

Entity Name: FIRST CHURCH OF THE NAZARENE PAHOKEE, INC.

Current Principal Place of Business:

480 BACOM POINT RD.
PAHOKEE, FL 33476

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 242
PAHOKEE, FL 33476

New Mailing Address:

FEI Number: 59-2534515 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOORE, DANNY R REV
480 BACOM POINT RD.
PAHOKEE, FL 33476 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MOORE, DANNY R REV
Address: 157 SOUTH GREENSTAR AVE.
City-St-Zip: PAHOKEE, FL 33476

Title: D ( ) Delete
Name: MOORE, RAYMOND
Address: 19241 S.W. CONNERS HWY.
City-St-Zip: CANAL POINT, FL 33438

Title: D ( ) Delete
Name: POWELL, STUART
Address: 271 PARKVIEW CT
City-St-Zip: PAHOKEE, FL 33476

Title: D ( ) Delete
Name: CARTER, WAYNE
Address: 13034 HWY. 441
City-St-Zip: CANAL POINT, FL 33438

Title: D ( ) Delete
Name: PEACOCK, BRENDA
Address: 2582 S.W. 14TH TERR.
City-St-Zip: PAHOKEE, FL 33476

Title: D ( ) Delete
Name: POWELL, STUART
Address: 271 PARVIEW CT.
City-St-Zip: PAHOKEE, FL 33476

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: D (X) Change ( ) Addition
Name: BRITT, RICHARD
Address: P.O. BOX 220
City-St-Zip: CANAL POINT, FL 33438

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

Title: D (X) Change ( ) Addition
Name: SCOTT, DEBBIE
Address: 16558 S.W. CONNERS HIGHWAY
City-St-Zip: CANAL POINT, FL 33438

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STUART POWELL D 04/19/2004

Electronic Signature of Signing Officer or Director — Date