

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2004 8:00 am
Secretary of State

03-08-2004 90022 026 ****61.25

DOCUMENT # N01000001747

1. Entity Name

WAUCHULA FIRST CHURCH OF THE NAZARENE, INC.



Principal Place of Business

**511 WEST PALMETTO STREET
WAUCHULA FL 33873**

Mailing Address

**511 WEST PALMETTO STREET
WAUCHULA FL 33873**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-3637133

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CHRISTOPHER, CHRIS
511 WEST PALMETTO STREET
WAUCHULA FL 33873**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Marajean Finch

Treasurer

Marajean Finch

Director

Mar 2, 2004

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

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

TITLE ☐ Delete
NAME **CHRISTOPHER, CHRIS**
STREET ADDRESS **511 WEST PALMETTO STREET**
CITY-ST-ZIP **WAUCHULA FL 33873**

TITLE ☐ Delete
NAME **FINCH, MARY JEAN**
STREET ADDRESS **3051 MEADOW LANE**
CITY-ST-ZIP **ZOLFO SPRINGS FL**

TITLE ☒ Delete
NAME **KOVWICH, FRED**
STREET ADDRESS **533 SE 6TH AVE #5**
CITY-ST-ZIP **CAPE CORAL FL 33990**

TITLE ☒ Delete
NAME **LOVE, JANET**
STREET ADDRESS **1158 BLUE JAY RD**
CITY-ST-ZIP **WAUCHULA FL 33873**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (IN 10)

TITLE ☐ Change ☒ Addition
NAME **D**
STREET ADDRESS **Rackmill, Steven**
CITY-ST-ZIP **428 N. 15th Av
Arcadia, FL 34266**

TITLE ☒ Change ☒ Addition
NAME **Finch, Marajean**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **D**
STREET ADDRESS **Rackmill, Carolyn**
CITY-ST-ZIP **428 N. 15th Av.
Arcadia, FL 34266**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Marajean Finch

Marajean Finch

Director

Mar 2, 2004

863-735-1239

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #