2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N01000002406

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

Current Principal Place of Business:

37085 CANAL ST.
CANAL POINT, FL 33438

New Principal Place of Business:

Current Mailing Address:

PO BOX 355
PAHOKEE, FL 33476

New Mailing Address:

FEI Number: 02-0583434 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

BETTY, CHIVARA
166 W. MAIN STREET
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: BELISARIO, FIGUEROA
Address: 166 W. MAIN ST
City-St-Zip: PAHOKEE, FL 33476

Title: ST ( ) Delete
Name: POLANCO, NOHEMI
Address: 155 S BARFIELD HWY
City-St-Zip: PAHOKEE, FL 33476

Title: T ( ) Delete
Name: ARRIAZA, ELISA
Address: 14530 US HWY 441 N
City-St-Zip: CANAL POINT, FL 33438

Title: RAD ( ) Delete
Name: CHIVARA, BETTY
Address: 166 W. MAIN ST.
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: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: NOHEMI POLANCO ST 05/01/2009

Electronic Signature of Signing Officer or Director — Date