

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N01000004291

1. Entity Name
CHURCH OF THE NAZARENE, LANTANA BETEL, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

04 OCT 11 PM 1:49

| | |
|------------------------------------------------------------------------------|------------------------------------------------------------------|
| Principal Place of Business 512 NO DIXIE HWY LANTANA, FL 33462 | Mailing Address 512 NO DIXIE HWY LANTANA, FL 33462 |
|------------------------------------------------------------------------------|------------------------------------------------------------------|



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

09282004 Chg-NP CR2E037 (10/03)

4. FEI Number Applied For
65-0250436 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SUAREZ, MIGUEL
512 NO DIXIE HWY
LANTANA, FL 33462**

7. Name and Address of New Registered Agent

Name **miguel Suarez**
Street Address (P.O. Box Number is Not Acceptable)
4062 N. BROWNING DR.
4062 N. BROWNING DR.
City **West palm BEACH FL** Zip Code **33406**

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.

Same

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by September 8, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | | |
|----------------|--------------------------------|---------------------------------|-----------------------------------|
| TITLE | D | <input type="checkbox"/> Delete | NAME SUAREZ, MIGUEL REV |
| STREET ADDRESS | 4062 NO BROWNING DR | | |
| CITY-ST-ZIP | WEST PALM BCH, FL 33406 | | |
| TITLE | D | <input type="checkbox"/> Delete | NAME RESTREPO, ESTHER |
| STREET ADDRESS | 571 WILKINSON RD | | |
| CITY-ST-ZIP | LANTANA, FL 33462 | | |
| TITLE | D | <input type="checkbox"/> Delete | NAME GARCIA, PEDRO |
| STREET ADDRESS | 1012 ALTO RD | | |
| CITY-ST-ZIP | LANATANA, FL 33462 | | |
| TITLE | | <input type="checkbox"/> Delete | NAME |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> Delete | NAME |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> Delete | NAME |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |

| | | | |
|----------------|-------------------------------------|-------------------------------------------------------------------|-----------------------------|
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | NAME 700041345320 |
| STREET ADDRESS | 09/27/04--01071--001 **75.00 | | |
| CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | NAME |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | NAME |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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: *Rev. Miguel Suarez* 10-6-2004 Date Daytime Phone #