

FILE NOW: FILING FEE IS \$61.25

FILED  
May 14 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N01068 (8)  
1. Corporation Name

HIGHLAND PARK CHURCH OF THE NAZARENE, INC.

Principal Place of Business

Mailing Address

C/O RON R. EDWARDS  
4777 LAKELAND HIGHLANDS RD  
LAKELAND FL 33813

C/O RON R. EDWARDS  
4777 LAKELAND HIGHLANDS RD  
LAKELAND FL 33813

3. Date Incorporated or Qualified

01/24/1984

4. FEI Number

59-0838102

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 C/O James T. Marshall

26 C/O James T. Marshall

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 4777 Lakeland Highlands Rd

27 4777 Lakeland Highlands Rd

City & State

City & State

23 Lakeland, Florida

28 Lakeland, Florida

Zip

Country

Zip

Country

24 33813

25 U.S.A.

29 33813

30 U.S.A.

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARSHALL, JAMES T  
4777 LAKELAND HIGHLANDS ROAD  
LAKELAND FL 33813

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

PD  
NAME DENNIS, LARRY D.  
STREET ADDRESS 4777 LKLAND HIGHLAND RD  
CITY-ST-ZIP LAKELAND FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

SD  
NAME LOVE, JOEL E  
STREET ADDRESS 4777 LAKELAND HIGHLANDS ROAD  
CITY-ST-ZIP LAKELAND FL

1.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

TD  
NAME MARSHALL, JAMES T.  
STREET ADDRESS 4777 LKLAND HIGHLAND RD  
CITY-ST-ZIP LAKELAND FL

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*James T. Marshall*

James T. Marshall

January 10, 1998 (941)647-3518

CR2E037 (10/97)