

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007044

FILED  
Feb 12, 2006  
Secretary of State

**Entity Name:** FORT MYERS SOLID ROCK CHURCH OF THE NAZARENE, INC.

**Current Principal Place of Business:**

2800 BROADWAY  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

4463 MEADE AVE  
FORT MYERS, FL 33901

**New Mailing Address:**

**FEI Number:** 83-0399480

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALTENE, ALTCHENCE REV.  
4463 MEADE AVE.  
FORT MYERS, FL 33901 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: ALTEME, ALTCHENCE  
Address: 4463 MEADE AVE.  
City-St-Zip: FORT MYERS, FL 33901

Title: D ( ) Delete  
Name: VOLTAIRE, MERCIDIEU  
Address: 365 MELODY CORT  
City-St-Zip: FORT MYERS, FL 33916

Title: D ( ) Delete  
Name: TOUSSAINT, SHERLINE  
Address: 1919 RICARDO AVE. #10  
City-St-Zip: FORT MYERS, FL 33901

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: TOUSSAINT, SHERLINE  
Address: 5239 REDCEDAR DR #7  
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the 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: MERCIDIU VOLTAIRE

D

02/12/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date