

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002397

FILED  
Apr 29, 2006  
Secretary of State

Entity Name: IGLESIA DEL NAZARENO NAPLES INC

## Current Principal Place of Business:

6455 HIDDEN OAKS LN  
NAPLES, FL 34119

## New Principal Place of Business:

## Current Mailing Address:

6455 HIDDEN OAKS LN  
NAPLES, FL 34119

## New Mailing Address:

FEI Number: 20-2325172

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PALACIOS, JULIO A PASTOR  
6455 HIDDEN OAKS LN  
NAPLES, FL 34119 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: P ( ) Delete  
Name: PALACIOS, JULIO A PASTOR  
Address: 8665 DULIP LANE APT 302  
City-St-Zip: NAPLES, FL 34104

Title: S ( ) Delete  
Name: CORREA, SANDRA  
Address: 4751 25 PLACE SW APT B  
City-St-Zip: NAPLES, FL 34116

Title: T ( ) Delete  
Name: ZABRA, LESBIA  
Address: 2714 54 ST SW  
City-St-Zip: NAPLES, FL 34116

Title: TRUS ( ) Delete  
Name: CHAVEZ, LUIS  
Address: 4751 25 PLACE SW APT B  
City-St-Zip: NAPLES, FL 34116

Title: TRUS ( ) Delete  
Name: LAGO, CARLOS  
Address: 4751 25 PLACE SW APT A  
City-St-Zip: NAPLES, FL 34116

Title: TRUS ( ) Delete  
Name: ZAFRA, DAVID  
Address: 2714 54 STREET SW  
City-St-Zip: NAPLES, FL 34116

## 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: TRUS (X) Change ( ) Addition  
Name: HERNANDEZ, BRENDA  
Address: 3270 THOMASSON DR APT D  
City-St-Zip: NAPLES, FL 34116

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 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: JULIO A PALACIOS

P

04/29/2006

Electronic Signature of Signing Officer or Director

Date