

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14266

FILED
Jun 30, 2005
Secretary of State

Entity Name: FIRST CHURCH OF THE NAZARENE OF NEW SMYRNA BEACH INC.

Current Principal Place of Business:

201 SOUTH ORANGE STREET
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

201 SOUTH ORANGE STREET
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number: 59-6543202 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

Name and Address of New Registered Agent:

ACHESON, CHARLES D.
1420 TRAVELERS PALM DR.
EDGEWATER, FL 32132 US

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: ACHESON, CHARLES D.,
Address: 1420 TRAVELERS PALM DR.
City-St-Zip: EDGEWATER, FL

Title: D () Delete
Name: STUCK, RICHARD,
Address: 1311 WILLOW OAK
City-St-Zip: EDGEWATER, FL

Title: SD () Delete
Name: WADE, SUSAN
Address: 2360 CAPT BUTLER TRAIL
City-St-Zip: NEW SMYRNA BEACH, FL

Title: TD () Delete
Name: STUCK, ELEANOR,
Address: 204 NINTH STREET
City-St-Zip: NEW SMYRNA BEACH, FL

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 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 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: ELEANOR STUCK

TREA

06/30/2005

Electronic Signature of Signing Officer or Director

Date