## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # N15572**

Corporation Name								
WEST MELBOURNE CHURCH OF THE NAZARENE INC.								:
				•				
					<del></del>			
Principal Place of Business Mailing Address						**** **** **** ****	1 <b>5151) 115</b> 1) 5151	41811 1581
4031 AURORA RD. 4031 AURORA RD. MELBOURNE FL 32940 MELBOURNE FL 32940								
MELBOURNE FL 32940 MELBOURNE FL 32940 US US					<u> </u>			, <b>(18</b> 11 1 <b>18</b> 1
	•	••	•					
					<u> </u>			
2. Principal Place of Business 2a. Mailing Address					3. Date Incorporated or Qualifo	bid		
21 28 28 28 28					06/23/,1986	<u>-</u>	<del></del>	-
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number 994258893 1 5 9 -	<b></b> .	<del></del>	lied For
22 27					387236086 # 59_	<u>3100820</u>		Applicable
City & Stat	e	City & State			5. Certifcate of Status Desired		\$8.75 Ad	
23		28				<u> </u>		
— <sup>Zip</sup> 32	934 COuntry	Zip 32934	Count	ry	6. Election Campaign Financin	<sup>ig</sup> $\square$	\$5.00 N Added to	
24	25	29 3	0		Trust Fund Contribution  10. Name and Address of New	v Registered /		1003
9. Name and Address of Current Registered Agent  81 Name						<u></u>		
					Joy E. Skuce			
CHAPMAN, KAREN E				2 Street A	ddress (P.O. Box Number is Not Acce			
12 ANNETTE DR.				3	2620 Oklahoma S	<del></del>		
MELBOURNE FL 32904					W. Melbourne	·	<del></del>	
Ì	•		8	4 City	·	FL	85 Zip Ci 3 2 9	ode
Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above office or registered agent, or both, in the State of Florida. Such change was authorized by agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					orporation submits this statement for t	he purpose of	changing its r	egistered
office or r	egistered agent, or both, in the State of	Florida. Such change was aut	horized b	y the corpor	ation's board of directors. I hereby ac	cept the appoin	itment as regi	stered
agent. I a			ia Siaiute	38.	•	4/14/9	19	ŀ
SIGNATURE	Signature, typed of printed pame of registered agent a		tegistered Ag	sent signature req	uired when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO	OFFICERS AN		
TITLE	TD	☐ DELETE	1,1 TITLE		SD		Change	☐ Addition
NAME	CHAPMAN, KAREN		1.2 NAMI	E	Joy E. Skuce			, ,
STREET ADDRESS	12 ANNETTE DRIVE		1.3 STRE	ET ADDRESS	2620 Oklahoma	st.		
CITY-ST-ZIP	MELBOURNE FL		1.4 CITY	-ST-ZIP	W. Melbourne,	<u>71. 329</u>		
TITLE	SD	☐ DELETE	2.1 TITLE	:	TD		Change	Addition
NAME	ELLIS, HARRY		2.2 NAM	E	Carol Deihl			
STREET ADDRESS	1456 COWART AVE		2.3 STRE	ET ADDRESS	1648 Orange Mar	nor Dr.		
CITY-ST-ZIP	MELBOURNE FL 32935		2.4 CITY	-ST-ZIP	Melbourne, Fl.	32934-	Change	
TITLE	De	☐ DELETE	3.1 TITLE	<u> </u>			[_] Change	Addition
NAME	DEMORANVILLE, TIMOTHY		3.2 NAM	E	•			
STREET ADDRESS	1537 SUNSET VIEW CIRCLE		3.3 STRE	ET ADDRESS			•_	
CITY-ST-ZIP	APOPKA FL 32703		3.4. CITY			· · · · · ·		- Addition
TITLE		☐ DELETE	4.1 TITLE	<u> </u>	•	•	Change	☐ Addition
NAME			4. 2 NAW	Œ				
STREET ADDRESS			4.3 STRE	ET ADDRESS		• • •		
CITY-ST-ZIP			4.4 CITY					□ A z dista =
TITLE		☐ DELETE	5.1 TTTLE				Change	☐ Addition
NAME			5.2 NAM		•			
CTOSET ADDRESS	I		■ 5.3 STRE	ET ADDRESS				

CITY-ST-ZIP 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

4/14/99 (407) 951-3193

☐ Change

Addition

Apr 21, 1999 8:00 am secretary of State

04-21-1999 90155 040 \*\*\*\*61.25