

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16830

FILED
Mar 27, 2011
Secretary of State

Entity Name: MERRITT ISLAND COMMUNITY CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

400 CROCKETT BLVD
MERRITT ISLAND, FL 32954

New Principal Place of Business:

Current Mailing Address:

400 CROCKETT BLVD
P O BOX 541902
MERRITT ISLAND, FL 32954

New Mailing Address:

P. O. BOX 541902
MERRITT ISLAND, FL 32954 US

FEI Number: 59-2604015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, PHIL
2675 RAINTREE LAKE CIRCLE
MERRITT ISLAND, FL 32953 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
Name: SCOTT, PHIL
Address: 2675 RAINTREE LAKE CIR.
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D
Name: HOFFMAN, CAROL
Address: 516 S PLUMOSA ST #21
City-St-Zip: MERRIT ISLAND, FL 32952

Title: D
Name: SCOTT, KAREN
Address: 2675 RAINTREE LAKE CIRCLE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: DT
Name: FAUCETT, BRAD
Address: 881 LEVITT PARKWAY
City-St-Zip: COCOA, FL 32955

Title: DTT
Name: HOFFMAN, CAROL
Address: 516 S PLUMOSA STREET, #21
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D
Name: LEWIS, AUDREY
Address: 3271 BISCAYNE DRIVE
City-St-Zip: MERRITT ISLAND, FL 32953

I hereby 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 all other like empowered.

SIGNATURE: CAROL L. HOFFMAN

DTT

03/27/2011

Electronic Signature of Signing Officer or Director

Date