2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18093

FILED Jan 11, 2004 Secretary of State

Entity Name: FIRST CHURCH OF THE NAZARENE OF OCALA, INC.

urrent P	rincipal Place o	of Business:	New Principal Plac	e of Business:
	7TH STREET L 326711044			
urrent N	lailing Address	:	New Mailing Addre	ss:
	7TH STREET L 326711044			
El Number	: 59-6543215	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	l Address of Cເ	ırrent Registered Agent:	Name and Address	of New Registered Agent:
	BARRY L 27TH ST. L 34471 US			
he above	named entity su	ubmits this statement for the i	ourpose of changing its register	ed office or registered agent, or both.
	e named entity su e of Florida.	ubmits this statement for the p	ourpose of changing its register	red office or registered agent, or both,
	e of Florida.	ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
the State	e of Florida. É	ubmits this statement for the positions of Registered Ag		red office or registered agent, or both, Date
n the State	e of Florida. É	c Signature of Registered Ag	ent	
the State	e of Florida. RE: Electronic S AND DIRECT	c Signature of Registered Agones: Delete	ent	Date
the State IGNATUI FFICER: tte: ame: ddress:	e of Florida. RE: Electronic S AND DIRECT TR () E SHAW, DEAN 1329 SE 36TH AV OCALA, FL 3447	© Signature of Registered Ago ORS: Delete VE 71	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR
the State IGNATUI FFICER: ttle: ame: ddress: tty-St-Zip: ttle: ame: ddress:	Electronic RE: Electronic S AND DIRECT TR () E SHAW, DEAN 1329 SE 36TH A OCALA, FL 3447 TR () E BOYD, WILLIAM 4255 S.E. 54TH S OCALA, FL	C Signature of Registered Ag ORS: Delete VE 71 Delete ST.	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition

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: BARRY DUNLAP C 01/11/2004