## Apr 29, 2003 8:00 am § Secretary of State

04-29-2003 90065 004 \*\*\*\*61.25

## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N26532

1. Entity Name
SEBASTIAN FIRST CHURCH OF THE NAZARENE, INC.

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	ce of Business W DR.		Mailing A				 	IE Briel difbe foile fi		II EISEIL EIREIL EI	BI( 11511 189)
2. Principal F	Place of Business		3. Mailing	Address	<u> </u>						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State			City &	City & State			4. FEI Number 65-0056895 Applied For Not Applicable				
Zip Country			Zip	Cip Country			5. Certificate of Status Desired   \$8.75 Additional Fee Required				
	6. Name and	Address of Current	Registered A	Agent Control		,- <u></u>	7. Name and Addr	ess of New Re	gistered A	\gent -	
					Nan	ne					
VACCHIANO, REV. JOHN A JR 641 CRYSTAL MIST AVE SEBASTIAN FL 32958				Street Address		et Address (	P.O. Box Number is N	ot Acceptable)			
SEDASTI	AN FL 32930				City				FL	Zip Coo	le
0 The share								b 05-44 5(- :			
	tions of registered		or the purpose	or changing its re	egisterea onic	e or register	ed agent, or both, in t	ne State of Florid	da. Fami	amiliar with,	and accept
SIGNATURE	Signature, typed or print	ed name of registered agent	and title if applicab	ole. (NOTE:	Registered Agent s	ignature required	when reinstating)		DATE		
		ď.	<del></del>								
FILE NOW: FEE IS \$61.25			}	9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees			Payable	
10.		OFFICERS AND DI	BECTORS.		11.	<del></del> ,	ADDITIONS (CHANCE	יי די פרבופנים	C AND DIE	PECTODE IN	110
TITLE	P	OFFICERS AND DI	nectons	☐ Delete	TITLE	<del>-                                    </del>	ADDITIONS/CHANGE	3 TO OFFICER	S AND DIF	Change	☐ Addition
NAME	VACCHIANO, J	OHN A JR		□ Delete	NAME	1				☐ Change	CT Addition
STREET ADDRESS	641 CRYSTAL				ATREET LEADS						
CITY-ST-ZIP	SEBASTIAN FL	32958			STREET ADDR	:ss					
TITLE	I D			<del> </del>	CITY-ST-ZIP	SS .					
	, -			☐ Delete	•	ss				Change	Addition
NAME STREET ADORESS	MARTIN, JOHN	H		☐ Delete	CITY-ST-ZIP TITLE NAME					☐ Change	☐ Addition
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12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee employered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like employered.

SIGNATURE:

IDEN UU GURNAUUR BIFNEY JOHN A VOCA

(772) 589 - 4935

CR2E037 (10/02)