

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

7/ **FILED**
Aug 10, 2006 8:00 am
Secretary of State
07-11-2006 90021 045 ****61.25

DOCUMENT # N26805 1. Entity Name MONTICELLO CHURCH OF THE NAZARENE, INC.					
Principal Place of Business 1590 N JEFFERSON STREET MONTICELLO, FL 32344			Mailing Address 1590 N JEFFERSON STREET MONTICELLO, FL 32344		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2696201	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Added For Not Added	
6. Name and Address of Current Registered Agent DODSON, JOHN W 1285 MAGNOLIA MONTICELLO, FL 32344				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity swears this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: Signature of the officer or director of the corporation and the filing officer					
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY ST ZIP	S HOLT, CAROLYN 4541 N. JEFFERSON ST. MONTICELLO, FL 32344	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY ST ZIP	TR MARTIN, JEFF 26 ABERDENE LA MONTICELLO, FL 32344	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY ST ZIP	TR MIMS, CHARLIE 1541 WEST LAKE RD. MONTICELLO, FL 32344	☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	TRUSTEE ADAMS, RYAN 23 West Bryant Circle MONTICELLO, FL 32344	
TITLE NAME STREET ADDRESS CITY ST ZIP	TR CLECKNER, DALE 553 JEFFERSON HEIGHTS RD. MONTICELLO, FL 32344	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY ST ZIP	P DODSON, JOHN W 1285 MAGNOLIA MONTICELLO, FL 32344	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete				
12. I hereby certify that the information submitted with this filing does not qualify for the exemptions contained in Chapter 119, 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 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 10 or Block 11 if changed, or on an attachment with an address with another the empowered.					
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

8/8/06