2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 10, 2003
Secretary of State

DOCUMENT# N37042

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

Current Principal Place of Business:

16545 HANNA RD.
LUTZ, FL 335495710 US

New Principal Place of Business:

Current Mailing Address:

16545 HANNA RD.
LUTZ, FL 335495710 US

New Mailing Address:

FEI Number: 59-3062449 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ELDER, TOLLIE H
16545 HANNA RD.
LUTZ, FL 335495710 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: CD ( ) Delete
Name: EDLER, TOLLIE H
Address: 1645 HANNA RD
City-St-Zip: LUTZ, FL 33549

Title: DS ( ) Delete
Name: RAMSEY, LOIS V
Address: 19208 ALICE CIRCLE
City-St-Zip: LUTZ, FL 33549

Title: D ( ) Delete
Name: ELDER, JACQUELINE
Address: 16545 HANNA RD
City-St-Zip: LUTZ, FL 33549

Title: D ( ) Delete
Name: PHILPOTT, PHYLLIS
Address: POST OFFICE BOX 804
City-St-Zip: LUTZ, FL 335480804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change ( ) Addition
Name: ELDER, TOLLIE H
Address: 1645 HANNA RD
City-St-Zip: LUTZ, FL 33549

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: TOLLIE H. ELDER CD 01/10/2003

Electronic Signature of Signing Officer or Director — Date