## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N38316

FILED Apr 12, 2009 Secretary of State

Entity Name: COMMUNITY CHURCH OF THE NAZARENE OF RUSKIN, INC.

Current Principal Place of Business: New Principal Place of Business:

501 2ND ST., S.E. RUSKIN, FL 33570 US

Current Mailing Address: New Mailing Address:

P.O. BOX 758 RUSKIN, FL 33570

FEI Number: 59-3582815 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOODS, DENNIS G JR

2201 4TH AVE SE

RUSKIN, FL 33570 US

ARCHER, ALLEN B

5619 GOLDEN ISLES DRIVE

APOLLO BEACH, FL 33572 US

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: ALLEN B. ARCHER 04/12/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition
Name: FRENCH, DONALD Name:

Address: 13020 FAIRGREEN DR Address: City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip:

 Title:
 D () Delete
 Title:
 D (X) Change () Addition

 Name:
 FLANNERY, JUDITH
 Name:
 FLANNERY, JUDITH

 Address:
 208 2ND AVE SE
 Address:
 437 STONE BRIAR DRIVE

City-St-Zip: RUSKIN, FL 33570 Address: 437 STONE BRIAR DRIVE

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: WOODS, DENNIS Name: ARCHER, ALLEN

Address: 201 4TH AVE SE Address: 5619 GOLDEN ISLES DRIVE City-St-Zip: RUSKIN, FL City-St-Zip: APOLLO BEACH, FL 33572

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

 Name:
 OUZMAN, HELEN
 Name:
 PARKS, JUDY

 Address:
 706 JOHNSON DRIVE
 Address:
 6302 US 41 S. # 364

 City-St-Zip:
 RUSKIN, FL 33570
 City-St-Zip:
 RUSKIN, FL 33570

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ALLEN B. ARCHER P 04/12/2009