

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N41970

(7)

1. Corporation Name

THE CARPENTER'S WORKSHOP, WESTSIDE CHURCH OF THE  
NAZARENE, INC.

Principal Place of Business

10800 SW 57TH PLACE  
FORT LAUDERDALE FL 33328  
US

Mailing Address

10800 SW 57TH PLACE  
FORT LAUDERDALE FL 33328  
US



3. Date Incorporated or Qualified  
02/05/1991

3a. Date of Last Report  
03/15/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

65-0205676

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WATSON, LUTHER S.  
10800 SW 57TH PLACE  
FORT LAUDERDALE FL 33328

81 Name

J. H. ROBERTS

82 Street Address (P.O. Box Number is Not Acceptable)

10800 SW 57 PLACE

83

84 City

FT LAUDERDALE,

FL

85 Zip Code

33328

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

J. H. ROBERTS

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

25 MAR 96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME UNGERBUEHLER, RICHARD  
STREET ADDRESS 201 SW 62ND TERRACE  
CITY-ST-ZIP PLANTATION FL

TITLE D  
NAME BRAMAN, MICHAEL  
STREET ADDRESS 8997 W. SUNRISE BLVD  
CITY-ST-ZIP PLANTATION FL

TITLE D  
NAME TRISSEL, MICHAEL  
STREET ADDRESS 1811 SW 29 AVE  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE D  
NAME ROBERTS, JOSEPH  
STREET ADDRESS 10800 SW 57TH PLACE  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

J. H. ROBERTS, Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-13-96

Date

(954) 434-7317

Daytime Phone #

CR2E037 (12/95)

3-29-1996