FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

N95000005398 (1)

IGLESIA BAUTISTA NAZARET, INC.

FILED Apr 30 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					I 1881) IBE TOTAL TOTAL TITLE STATE BEITH BEITH BEITH BEITH BEITH THIS THIS TENET THE TOTAL TOTA
2920 SOUTHEAST 62ND STREET OCALA FL 34480		2820 SOUTHEAST 62ND STREET OCALA FL 34480			3. Date Incorporated or Qualified
					4. FEI Number Applied For
		· · · · · · · · · · · · · · · · · · ·			59-3367914 Not Applicable
Principal Place of Business 21		2a. Mailing Address 28			5. Certificate of Status Desired See Required Fee Required
! Suite, Apt.	#, etc.	Suite, Apt. #, etc.			Election Campaign Financing \$5.00 May Be
22 City & Stat		City & State			Trust Fund Contribution Added to Fees
28 City & Stat	6	28			7. Is this nonprofit corporation a homeowners association?
Zip	Country	Zip	Counti	·v	8. This corporation owes or has paid the current year Intangible
24	25		30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent
			8.	l Name	
Luzuriaga, webster			6:	2 Street	Address (P.O. Box Number is Not Acceptable)
1349 S.E. 18TH PLACE			<u> </u>		
OCALA	FL 34471		6	"	
			8	City	FL 85 Zip Code
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 Webster Luzuriaga Register Agent Signature, typed or profiled name of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstalling) OATE OATE					
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	Luzuriaga, Webster		1.2 NAME		
STREET ADDRESS	1349 S.E. 18TH PLAZA		1.3 STREE	T ADDRESS	
CITY-ST-ZIP	OCALA FL	X DELETE	1.4 CITY-		[] Addition
TITLE	DRA	TX) DETERE	2.1 TITLE		Deacon Addition
NAME	ESPIET, MILDRED 7120 S.E. COUNTRY ROAD 4	10	2.2 NAME		RIVERA, GERMAN
STREET ADDRESS	SUMMERFIELD FL	12		T ADDRESS	
CATY-ST-Z#P TITLE	DS	☐ DELETE	2. 4 CITY 3.1 TITLE		2137 S. E. 5th. ST.
NAME	MAYMI, BLANCA H.		3.2 NAME		OCALA, FLORIDA 34471 Li Change Li Addition
STREET ADDRESS	11822 S.E. 123RD AVE.		1	T ADDRESS	
CITY-ST-ZIP	OCKALAWAHA FL		3.4. CITY		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAM	Ē	
STREET ADDRESS			4.3 STREE	T ADORESS	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	4.4 CITY-	ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE		Addition
NAME			5.2 NAME		<pre>//h///\></pre>
STREET ADDRESS			5.3 STREE	T ADDRESS	W114511
CITY-ST-ZIP	<u></u>	T brusse	5.4 CITY-		100002506351 Dadding
TITLE		DELETE	6.1 TITLE		-04/30/9801036001
NAME			6.2 NAME		***61.25
STREET ADDRESS			6.3 STREE	TADORESS	
I ITV_C1_7ID 4			■ 6.4.CITV	\$1.7IP	1

14. 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 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.

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