2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# N96000000892

Entity Name: FORT LAUDERDALE SPANISH CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

2300 SW 15 AVE.
FT. LAUDERDALE, FL 33315

New Principal Place of Business:

Current Mailing Address:

2300 SW 15 AVE.
FT. LAUDERDALE, FL 33315

New Mailing Address:

FEI Number: 65-0633501 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CANIZALES, OSMAN
7961 N.W. 16 ST
PEMBROKE PINES, FL 33024 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: D ( ) Delete
Name: CANIZALES, GISELA
Address: 7961 N W 16 ST
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D ( ) Delete
Name: ROMERO, IVY
Address: 5561 SW 3 CT.
City-St-Zip: PLANTATION, FL 33317

Title: D ( ) Delete
Name: DIAZ, CASILDA B
Address: 1519 BARCELONA WAY
City-St-Zip: WESTON, FL 33327

Title: D ( ) Delete
Name: LANDINO, FRANCISCO
Address: 1673 LAUDERDALE MANOR DR
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D ( ) Delete
Name: CANIZALES, OSMAN
Address: 7961 NW 16TH ST.
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D ( ) Delete
Name: NIEVES, RUTH
Address: 6211 MAYO ST.
City-St-Zip: HOLLYWOOD, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: IVY ROMERO MS. 02/23/2009
Electronic Signature of Signing Officer or Director — Date