

FILE NOW: FILING FEE IS \$61.25

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Apr 09 1998 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N97000002084 (8)**

1. Corporation Name

**FORREST HILL CHURCH OF NAZERENE, INC.**



Principal Place of Business	Mailing Address
2633 VANGAUNDAY ST JACKSONVILLE FL 32208	2633 VANGAUNDAY ST JACKSONVILLE FL 32208

3. Date Incorporated or Qualified
04/14/1997

4. FEI Number	Applied For
59-6546049	Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 2633 Vangundy Rd	26 2633 Vangundy Rd
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
JACKSONVILLE FL 32208	JACKSONVILLE FL 32208
24 Zip	29 Zip
Country	Country
25	30

5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent	
CHARLES, GIDEON 2633 VANGAUNDAY ST JACKSONVILLE FL 32208	

10. Name and Address of New Registered Agent	
81 Name	Charles, Gideon
82 Street Address (P.O. Box Number is Not Acceptable)	2633 VANGUNDY RD
83	
84 City	JACKSONVILLE FL
85 Zip Code	32208

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: *[Signature]* DATE: April 2/98

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	D DAVIS, WILLIE E
STREET ADDRESS	7980 DENHAM ST
CITY - ST - ZIP	JACKSONVILLE FL 32208
TITLE	<input type="checkbox"/> DELETE
NAME	D FOSTER, NATHEORY
STREET ADDRESS	4979 TPOROYAL LANE
CITY - ST - ZIP	JACKSONVILLE FL 32277
TITLE	<input type="checkbox"/> DELETE
NAME	D ALLEN, WILLIAM E
STREET ADDRESS	8588 DARLINGTON DR
CITY - ST - ZIP	JACKSONVILLE FL 32209
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	D Foster, NATHEORY
2.3 STREET ADDRESS	4979 TPOROYAL LANE
2.4 CITY - ST - ZIP	JACKSONVILLE FL 32277
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	D ALLEN, WILLIAM K
3.3 STREET ADDRESS	8588 DARLINGTON DR
3.4 CITY - ST - ZIP	JACKSONVILLE FL 32208
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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.

SIGNATURE: *William K. Allen* 4-3-98 904-766-4709

CR2E037 (10/97)