

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003459

FILED  
Mar 29, 2006  
Secretary of State

**Entity Name:** TAMPA FIRST HISPANIC CHURCH OF THE NAZARENE, INC.

**Current Principal Place of Business:**

109 APRIL LANE  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

109 APRIL LANE  
TAMPA, FL 33614

**New Mailing Address:**

**FEI Number:** 59-3351922

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DIAZ, J. EDGAR  
4417N W KNOLLWOOD ST  
TAMPA, FL 33614 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: DT ( ) Delete  
Name: HERRERA, ELADIO  
Address: 14802 N FLORIDA AVE, APT 239  
City-St-Zip: TAMPA, FL 33613

Title: DS ( ) Delete  
Name: PASTRANA, ABIGAIL  
Address: 5410 MOUNTAIN FARM CT  
City-St-Zip: TAMPA, FL 336241565

Title: P ( ) Delete  
Name: DIAZ, J. EDGAR  
Address: 4417 W KNOLLWOOD ST  
City-St-Zip: TAMPA, FL 33614

Title: D ( ) Delete  
Name: ARAMIS, ALVAREZ  
Address: 30450 TREMONT DR  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D ( ) Delete  
Name: ALVAREZ, JOSE  
Address: 6818 N HUBERT AVE  
City-St-Zip: TAMPA, FL 33614

Title: D ( ) Delete  
Name: CORTES, NANCY ANN  
Address: 4417 W KNOLLWOOD ST  
City-St-Zip: TAMPA, FL 33614

**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 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: ELADIO HERRERA

TD

03/29/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date