

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003459

FILED
Apr 14, 2009
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:

109 APRIL LANE
TAMPA, FL 33613

Current Mailing Address:

109 APRIL LANE
TAMPA, FL 33614

New Mailing Address:

109 APRIL LANE
TAMPA, FL 33613

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:

DIAZ, J. EDGAR
109 APRIL LANE
TAMPA, FL 33613 US

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:

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: CORTES, SONIA
Address: 109 APRIL LANC
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: DIAZ, FRANK
Address: 3018 HEITER ST
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: CORTES, MARIA
Address: 4514 WEST SLIGH 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: DT (X) Change () Addition
Name: CORTES, SONIA
Address: 109 APRIL LANE
City-St-Zip: TAMPA, FL 33613

Title: DS (X) Change () Addition
Name: PASTRANA, ABIGAIL
Address: 5410 MOUNTAIN FARM CT
City-St-Zip: TAMPA, FL 33624

Title: P (X) Change () Addition
Name: DIAZ, J. EDGAR
Address: 109 APRIL LANE
City-St-Zip: TAMPA, FL 33613

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

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

Title: D (X) Change () Addition
Name: CORTES, NANCY ANN
Address: 109 APRIL LANE
City-St-Zip: TAMPA, FL 33613

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: J. EDGAR DIAZ

P

04/14/2009

Electronic Signature of Signing Officer or Director

Date