## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1998 DOCUMENT #

N9700006865 (6)

IGLESIA DEL NAZARENO DE WINTER PARK. INC.

	F	ILED	
May	13	1998	8:00am
Sec	ret	ary of	State

Principal Place of Business Mailing Address					1 100 HILL BIO 10 HILL SOUL BOIL BOIL SOUL SOUL SOUL SOUR SOUL GIVE GIVE GIVE GIVE			
1220 FORMOSA AVENUE 1220 FORMOSA AVENUE WINTER PARK FL 32789 WINTER PARK FL 32789				3. Date Incorporated or Qualified 12/10/1997				
						4. FEI Number Applied For Not Applicable		
2. Principal Place of Business 2a. Mailing Address 21						5. Certificate of Status Desired \$8.75 Additional Fee Required		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be		
22		27				Trust Fund Contribution Added to Fees		
City & Stat	te	City & State				7. Is this nonprofit corporation a homeowners association?		
23 Zip	Country	28 Zip	Col	intry		8. This corporation owes or has paid the current year Intangible		
24	25	29	30			Personal Property Tax due June 30. Yes No		
241	9. Name and Address of Cui		1001			10. Name and Address of New Registered Agent		
	,			81	Name			
SOTO, (	DENIS			B2	Street Ad	Idress (P.O. Box Number is Not Acceptable)		
	ORMOSA AVENUE			"	Stibbl Nu	Address (F.O. Box Number is Not Acceptable)		
WINTER	PARK FL 32789			83				
				84	City	■ 85 Zip Code		
	_			1	•			
11. Pursuant	to the provisions of Sections 617.	0502 and 617.1508, Florida St	atutes, the a	bove	-named co	proparation submits this statement for the purpose of changing its registered		
office or a	registered agent, or both, in the 5 am familia/ with, and accept the of	tate of Florida. Such change w Bligations of, Section 617.0503	ras authorize I. Florida Sta	tutes	the corpor i.	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered		
SIGNATURE	They son		•					
SIGNATURE	Signature, typed or printed name of registered	d agent and title if applicable.	(NOTE: Registere	d Age	nt signature rec	guired when reinstating) DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	DELETE	1.1 1	ITLE	]	Change Addition		
NAME	ACEVEDO, RAUL	•	1.2 N	AME	\frac{1}{2}	Rodriquez, Carlos 312 Woodfield OAKS DR.		
STREET ADDRESS	1220 FORMOSA AVENUE	_	1.3 \$	TREET	ADDRESS \	315 MOOGTHEIR CHAS ISK		
CITY-ST-ZNP	WINTER PARK FL 32789		1.4 0	ITY-S	T-ZIP	Apopla, FL 32703		
TITLE	D CONTROL ON AND CO	PETELE	2.1 T	ITLE	L	Change Addition		
NAME	CORTES, ORLANDO		22 N	AME	\	lega, Samuel De.		
STREET ADDRESS	1220 FORMOSA AVENUE		2.3 5	TREET	ADDRESS \	135 Sunctest		
CITY-ST-ZW	WINTER PARK FL 32789			CITY-S	T-ZIP	Apopka, Fl. 32703		
TITLE	D	☐ DELETE	3.1 T			Change Addition		
NAME	FIGUEROA, JULIA		3.2 N	AME	1	iquera, Julia DAKS DR.		
STREET ADDRESS	1220 FORMOSA AVENUE		3.3 5	TREET	ADDRESS   (	1372 WORKING O.		
CITY-ST-ZIP	WINTER PARK FL 32789	T pr. rec		TY-S	ST-ZIP	Apopka, Tz 32703		
TITLE	D HOLLEUN EDA JECCICA	☐ DELETE	4.1 Ti		١	Hollfulleda, Jessica Al Change   Addition		
NAME	MOLLFULLEDA, JESSICA			NAME	17	Blud # 1330		
STREET ADDRESS	1220 FORMOSA AVENUE					21tamonte Springs Fr = 2714		
CITY-ST-ZIP	WINTER PARK FL 32789			ITY-S	T-ZIP	21 tary 101 te Springs 12 Change Addition		
TITLE	D MOLLEURI FOA MULKEN	DELETE	5.1 Ti			Change Addition		
NAME	MOLLFULLEDA, WILKEN		5.2 N					
STREET ADDRESS	1220 FORMOSA AVENUE				ADDRESS			
CITY-ST-ZIP	WINTER PARK FL 32789			ITY-8		☐ Change ☐ Addition		
TITLE	D ANGEL	DELETE			Ţ	<b>7</b>		
NAME	RIVERA, ANGEL		6.2 N		[7]	Rivera Angel 5289 Commander Dr #301		
STREET ADDRESS	1220 FORMOSA AVENUE				1 7			
CITY-ST-ZIP	WINTER PARK FL 32789			ITY-\$		in Section 119.07(3)(i). Florida Statutes. I further certify that the information		
14 I harabu	certify that the information supplies	d with this filing does not quel	ITY for the ex	amni	non stated	IN SECTION 119.07(3)(I). FIORIDA STATUTES. I TURTHER CERTITY THAT THE INFORMATION		

Thereby certify that the information supplied with this shing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report of 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 of 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 an attachment with an address.