

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000007096

FILED  
Apr 30, 2002 8:00 AM  
Secretary of State

Entity Name: NASSAU CHURCH OF THE NAZARENE, INC.

## Current Principal Place of Business:

665 U.S. 17 NORTH  
YULEE, FL 32097

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1750  
YULEE, FL 32041

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZOLLINHOFFER, R.E.  
5711 KENNERLY RD.  
JACKSONVILLE, FL 32216 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: MCLEOD, LUTHER  
Address: 1702 AVANT RD.  
City-St-Zip: YULEE, FL 32097

Title: D ( ) Delete  
Name: SALMON, DANIEL  
Address: 4624 MCKENDREE DR.  
City-St-Zip: CALLAHAN, FL 32011

Title: D ( ) Delete  
Name: STOREY, STAN  
Address: 207 MEADOWFIELD BLUFF RD.  
City-St-Zip: YULEE, FL 32097

Title: D ( ) Delete  
Name: DEMPSTER, DALE  
Address: 2148 LADY DI LN.  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete  
Name: STREET, JERRY  
Address: P.O. BOX 83  
City-St-Zip: YULEE, FL 32041

Title: P ( ) Delete  
Name: ZOLLINHOFFER, R.E.  
Address: 5711 KENNERLY DRIVE  
City-St-Zip: JACKSONVILLE, FL 32207

## 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: D (X) Change ( ) Addition  
Name: DEMPSTER, DALE  
Address: 2148 LADY DI LN.  
City-St-Zip: JACKSONVILLE, FL 32246

Title: T (X) Change ( ) Addition  
Name: DEMPSTER, CARLA  
Address: 2148 LADY DI LANE  
City-St-Zip: JACKSONVILLE, FL 32246

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 Section 119.07(3)(i), 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: CARLA DEMPSTER

T

04/30/2002

Electronic Signature of Signing Officer or Director

Date