## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000007096

FILED Apr 30, 2009 Secretary of State

Entity Name: NASSAU CHURCH OF THE NAZARENE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 850987 US 17 NORTH YULEE, FL 32097 **Current Mailing Address: New Mailing Address:** P.O. BOX 1750 YULEE, FL 32041 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **GARY HUTCHESON** 86458 MEADOWWOOD DRIVE YULEE, FL 32097 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HUTCHESON, GARY Name: Name: 86458 MEADOWWOOD DRIVE Address: Address: City-St-Zip: YULEE, FL 32097 City-St-Zip: Title: Title: (X) Change ( ) Addition () Delete SELL, STEVE Name: FETTINGER, BARBARA MRS. Name: Address: 614 LITTLE PINEY ISLAND Address: 274 KRISTIN'S DRIVE City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: ST. MARY'S, GA 31558 Title: () Delete Title: () Change () Addition REEVES, DAVID Name: Name: 83075 ST. MARK DRIVE Address: Address: City-St-Zip: YULEE, FL 32097 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition Name: BARBER, CHARLENE Name: BELL, MICHAEL 95021 RAINTREE LANE Address: Address: 11477 OAKBANK CT. City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: JACKSONVILLE, FL 32034 Title: () Delete Title: () Change () Addition PHIL, JONES Name: Name: 126 OLD FOLKSTON ROAD Address: Address: KINGSLAND, GA 32548 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition BROWN, VALERIE WAGNER JENNIEER Name: Name: Address: 96497 COMMODORE PT. DR. Address: 17 OZZIE LANE YULEE, FL 32097 WOODBINE, GA 31569 City-St-Zip: City-St-Zip:

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: GARY L. HUTCHESON REV. 04/30/2009