916 NE 4TH ST	REET			
POMPANO BEA	ACH, FL 33060			
Current Mai	ling Address:			
916 NE 4TH POMPANO E	STREET BEACH, FL 33060			
FEI Number: 59-0939946 Certificate of Status De			ired: No	
Name and A	ddress of Current Registered Agent:			
HAGE, PAUL				
1851 NE 28TH A POMPANO BEA	ACH, FL 33066 US			
POMPANO BEA		tered office or regis	tered agent, or both, in the State of Flo	orida.
POMPANO BEA	ACH, FL 33066 US	tered office or regis	tered agent, or both, in the State of Flo	rida. 04/03/2019
POMPANO BEA	ACH, FL 33066 US I entity submits this statement for the purpose of changing its regis	tered office or regisi	tered agent, or both, in the State of Flo	
POMPANO BEA	ACH, FL 33066 US I entity submits this statement for the purpose of changing its regis E PAUL HAGE Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flo	04/03/2019
POMPANO BEA The above named SIGNATURE	ACH, FL 33066 US I entity submits this statement for the purpose of changing its regis E PAUL HAGE Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flo	04/03/2019
POMPANO BEA The above named SIGNATURE Officer/Direc	ACH, FL 33066 US I entity submits this statement for the purpose of changing its regis E PAUL HAGE Electronic Signature of Registered Agent Ctor Detail :			04/03/2019
POMPANO BEA The above named SIGNATURE Officer/Direc Title	ACH, FL 33066 US I entity submits this statement for the purpose of changing its regis PAUL HAGE Electronic Signature of Registered Agent Ctor Detail : P	Title	S	04/03/2019
POMPANO BEA The above named SIGNATURE Officer/Dired Title Name	ACH, FL 33066 US I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits this statement for the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the purpose of changing its regis I entity submits the pu	Title Name	S SPEAR, BOB 607 NE 4TH STREET	04/03/2019

Name Address

City-State-Zip:

I hereby 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 all other like empowered.

SIGNATURE: JOE ROBERTS

DIRECTOR

SCHAFFER, LOREN

4480 NW 8TH STREET

COCONUT CREEK FL 33066

04/03/2019

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 745572

Entity Name: FIRST CHURCH OF THE NAZARENE OF POMPANO BEACH, INC.

Current Principal Place of Business:

ROBERTS, JOE

DAVIE FL 33328

10800 SW 57TH PLACE

Name

Address

City-State-Zip:

Date