

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766771

**FILED**  
**Feb 24, 2014**  
**Secretary of State**  
**CC3451446657**

**Entity Name:** PORT RICHEY LIVING FAITH COMMUNITY CHURCH OF THE NAZARENE, INC.

**Current Principal Place of Business:**

11038 LITTLE RD  
NEW PORT RICHEY, FL 34654

**Current Mailing Address:**

11038 LITTLE RD  
NEW PORT RICHEY, FL 34654

**FEI Number: 59-1699970**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BRANNON, JAMES D  
6909 TIERRA LINDA STREET  
PORT RICHEY, FL 34668 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	P
Name	BRANNON, JAMES D
Address	6909 TIERRA LINDA STREET
City-State-Zip:	PORT RICHEY FL 34668
Title	T
Name	WIPERT, DON
Address	9604 STAR TRAIL
City-State-Zip:	NEW PORT RICHEY FL 34654
Title	SS
Name	JOHNS, LAURA
Address	4454 SAWGRASS BLVD
City-State-Zip:	NEW PORT RICHEY FL 34653
Title	D
Name	WOOD, JAMI
Address	8216 BAYTREE DRIVE
City-State-Zip:	NEW PORT RICHEY FL 34653

Title	T
Name	VANDEBORNE, GARY
Address	7745 PROSPECT HILL CIRCLE
City-State-Zip:	NEW PORT RICHEY FL 34654
Title	T
Name	JOHNS, JOSHUA
Address	4454 SAWGRASS BLVD
City-State-Zip:	NEW PORT RICHEY FL 34653
Title	T
Name	VANDEBORNE, PHYLLIS
Address	7745 PROSPECT HILL CIRCLE
City-State-Zip:	NEW PORT RICHEY FL 34654
Title	D
Name	GUECIA, LYNNE
Address	10620 OAK DRIVE
City-State-Zip:	HUDSON FL 34669

**Continues on page 2**

*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: PHYLLIS VANDEBORNE**

**TREASURER**

**02/24/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title D  
Name PARKER, ROBERTA  
Address 10440 SWEET LANE  
City-State-Zip: PORT RICHEY FL 34668

Title S  
Name ELLISON, JUNE  
Address 9501 CONSERVATION DRIVE  
City-State-Zip: NEW PORT RICHEY FL 34655

Title MS  
Name ABNER, MIYAKO  
Address 11655 LINDEN DRIVE  
City-State-Zip: SPRING HILL FL 34608