

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00877

FILED
Feb 26, 2015
Secretary of State
CC3306299631

Entity Name: PLANT CITY COMMUNITY CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

2402 MUD LAKE RD.
PLANT CITY, FL 33564

Current Mailing Address:

PO BOX 3545
P.O. BOX 3545-WALDEN WOODS STATION
PLANT CITY, FL 33564 US

FEI Number: 59-2787022

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORZINE, DONALD RREV
1403 SANDALWOOD DR.
PLANT CITY, FL 33563 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 PPD
Name CORZINE, DON REV.
Address 1403 SANDALWOOD DR.
City-State-Zip: PLANT CITY FL 33563

Title ST
Name ENGLISH, PHYLLIS MRS.
Address 3606 ADAMS FARM DR.
City-State-Zip: LITHIA FL 33547

Title TT
Name CHEPULIS, CAROL MS.
Address 915 RIDGE HAVEN DR.
City-State-Zip: BRANDON FL 33511

Title BRD
Name BENNINGFIELD, BETTY MRS.
Address 3910 SUNNYBROOK LN.
City-State-Zip: LAKELAND FL 33815

Title NMI
Name MEIGHAN, MARY MISS
Address 104 CAPRI CT. SO.
City-State-Zip: PLANT CITY FL 33567

Title BRD.
Name PATRICK, LINDA MRS.
Address 5321 SPRING CREEK DR.
City-State-Zip: LAKELAND FL 33811

Title TRUSTEE
Name BROWN, JASON
Address 1422 HATCHER LOOP DR.
City-State-Zip: BRANDON FL 33511

Title TRUSTEE
Name BROWN, TERI
Address 1422 HATCHER LOOP DR.
City-State-Zip: BRANDON FL 33511

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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: DONALD R. CORZINE

02/26/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name SPECK, CAROL MRS.
Address 1604 MELODIE DR.
City-State-Zip: BRANDON FL 33510