

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10657

FILED
Apr 01, 2018
Secretary of State
CC5185433690

Entity Name: PORT ORANGE CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

840 TAYLOR RD
PORT ORANGE, FL 32127

Current Mailing Address:

840 TAYLOR RD
PORT ORANGE, FL 32127 US

FEI Number: 59-6543227

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHOWALTER, GERRON
840 TAYLOR RD
PORT ORANGE, FL 32127 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: GERRON SHOWALTER

04/01/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SHOWALTER, GERRON
Address 840 TAYLOR RD
City-State-Zip: PORT ORANGE FL 32127

Title TRUSTEE
Name BAKER, MARK
Address 1218 THOMASINA DRIVE
City-State-Zip: PORT ORANGE FL 32129

Title TREASUER, TREASURER
Name SEIM, PATTI S
Address 6123 SABAL POINT CIRCLE
City-State-Zip: PORT ORANGE FL 32128

Title SECRETARY, STEWARD
Name NATHEY, PATSY
Address 840 TAYLOR RD
City-State-Zip: PORT ORANGE FL 32127

Title TRUSTEE
Name GARRETT, BETTY
Address 840 TAYLOR RD
City-State-Zip: PORT ORANGE FL 32127

Title TRUSTEE
Name HALL, ANGELA
Address 840 TAYLOR RD
City-State-Zip: PORT ORANGE FL 32127

Title TRUSTEE
Name MOTGOMERY, JAN
Address 840 TAYLOR RD
City-State-Zip: PORT ORANGE FL 32127

Title TRUSTEE
Name HAGSTROM, KAREN
Address 840 TAYLOR RD
City-State-Zip: PORT ORANGE FL 32127

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: PATTI S. SEIM

TREASURER

04/01/2018

Electronic Signature of Signing Officer/Director Detail

Date