

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000001425

**Entity Name:** NAZARENE INTERNATIONAL MINISTRIES INC.

**Current Principal Place of Business:**

2657 NW 79 AVE  
MARGATE, FL 33063

**Current Mailing Address:**

2657 NW 79 AVE  
MARGATE, FL 33063

**FEI Number: 80-0875054**

**Certificate of Status Desired: No**

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

TIBERT, STANLEY D  
2657 NW 79 AVE  
MARGATE, FL 33063 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 PASTOR  
Name TIBERT, STANLEY D  
Address 2657 NW 79 AVE  
City-State-Zip: MARGATE FL 33063

Title PRESIDENT  
Name TIBERT, LENY  
Address 2657 NW 79 AVE  
City-State-Zip: MARGATE FL 33063

Title S  
Name BAPTISTE, BEATRICE  
Address 6761 NW 45 ST  
City-State-Zip: LAUDERHILL FL 33319

Title VP  
Name BAPTISTE, STANLEY M  
Address 6761 NW 45 ST  
City-State-Zip: LAUDERHILL FL 33319

Title ASST. TREASURER  
Name ALOUIDOR, HEROLD  
Address 1331 NW196 ST  
City-State-Zip: MIAMI GARDEN FL 33169

Title TREASURER  
Name CASSEUS, EDWIN  
Address 17945 NW 7 AVE  
City-State-Zip: MIAMI FL 33169

*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: LENY TIBERT**

**P**

**01/13/2015**

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

\_\_\_\_\_  
Date