

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25942

**FILED**  
**Apr 20, 2016**  
**Secretary of State**  
**CC4991216240**

**Entity Name:** CHRISTIAN DEVELOPMENT CENTER A CHURCH OF THE NAZARENE INC.

**Current Principal Place of Business:**

343 NAIL STREET NE  
PALM BAY, FL 32907-8554

**Current Mailing Address:**

1414 KASLO CIRCLE NW  
PALM BAY, FL 32907 US

**FEI Number: 59-2824359**

**Certificate of Status Desired: No**

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

CURRY, MARGARET  
343 NAIL ST. NE  
PALM BAY, FL 32907 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           PRESIDENT  
Name           ROWAN, STUART E  
Address        3759 PEACOCK DR.  
City-State-Zip: MELBOURNE FL 32904

Title           TRUSTEE  
Name           PEACHER, BOB  
Address        1853 COGAN DR SE  
City-State-Zip: PALM BAY FL 32909

Title           TREASURER  
Name           GRASSMAN, SHEILA A  
Address        1414 KASLO CIRCLE NW  
City-State-Zip: PALM BAY FL 32907

Title           TRUSTEE  
Name           CLARKE, CORRELL  
Address        1571 REPUBLIC ST. SE  
City-State-Zip: PALM BAY FL 32909

Title           STEWARD  
Name           REED, ROBIN  
Address        474 CORAL AVE. SE  
City-State-Zip: PALM BAY FL 32909

Title           CORPORATE SECRETARY  
Name           WHITFILL, PATRICIA  
Address        796 MUNICH ST. NW  
City-State-Zip: PALM BAY FL 32907

*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: SHEILA GRASSMAN**

**TREASURER**

**04/20/2016**

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

\_\_\_\_\_  
Date