

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29715

Entity Name: NAZARENE CENTRO DE REFUGIO, INC.

Current Principal Place of Business:

2745 SOUTH BABCOCK STREET
SUITE NCM
MELBOURNE, FL 32901

Current Mailing Address:

2745 SOUTH BABCOCK STREET
SUITE NCM
MELBOURNE, FL 32901 US

FEI Number: 59-2911684

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATRICK, MARK R.
4029 ATLANTIC BLVD.
JACKSONVILLE, FL 32207 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: MARK R. PATRICK

03/19/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name TOOLEY, PAM
Address 2745 SOUTH BABCOCK STREET
 SUITE NCM
City-State-Zip: MELBOURNE FL 32901

Title PRESIDENT
Name RANDALL, REBECCA
Address 2745 SOUTH BABCOCK STREET
 SUITE NCM
City-State-Zip: MELBOURNE FL 32901

Title EXECUTIVE DIRECTOR
Name TOOLEY, JOEL
Address 2745 SOUTH BABCOCK STREET
 SUITE NCM
City-State-Zip: MELBOURNE FL 32901

Title SECRETARY
Name TOOLEY, ALLISON
Address 2745 SOUTH BABCOCK STREET
 SUITE NCM
City-State-Zip: MELBOURNE FL 32901

Title OFFICER
Name THORNTON, TIFFANY
Address 2745 SOUTH BABCOCK STREET
 SUITE NCM
City-State-Zip: MELBOURNE FL 32901

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: JOEL TOOLEY

EXECUTIVE DIRECTOR

03/19/2020

Electronic Signature of Signing Officer/Director Detail

Date