## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29715

Entity Name: CHURCH OF THE NAZARENE OF TAVARES, INC.

**FILED** Jan 11, 2014 **Secretary of State** CC9564705524

## **Current Principal Place of Business:**

32151 DAVID WALKER RD. TAVARES, FL 32778

## **Current Mailing Address:**

32151 DAVID WALKER RD. TAVARES. FL 32778

FEI Number: 59-2911684 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PARRY, CARL WSR. 2820 WEKIVIA ROAD TAVARES, FL 32778 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 **SECRETARY** Title **TREASURER** 

PARRY, CARL WSR. STEWART, DANIEL L Name Name

1512 GOLDEN PALM CIRCLE 2820 WEKIVA ROAD Address Address

P. O. BOX 1917

**STEWARD** 

Title

City-State-Zip: TAVARES FL 32778 City-State-Zip: TAVARES FL 32778

Title CORRESPONDING SECRETARY

Name HAMLIN, JOYCE

Name GAARD, BETTY Address 11835 HUGGINS ROAD

2547 CROOKED LAKE DRIVE Address LEESBURG FL 34788 City-State-Zip: EUSTIS FL 32726

City-State-Zip:

Title **STEWARD** Title **STEWARD** 

GANTZ. CARYN Name Name SAKADUSKI, BAYNE 2504 MONTECITO AVE. Address

Address 87 HOLLY DRIVE City-State-Zip: EUSTIS FL 32726 City-State-Zip: TAVARES FL 32778

Title **PASTOR** 

TOOLEY, JOEL Name

21248 EVERGREEN COURT Address MOUNT DORA FL 32757 City-State-Zip:

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.

01/11/2014 SIGNATURE: DANIEL L. STEWART **TREASURER**