

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## 1999

DOCUMENT # N26491

OAK HILL FIRST CHURCH OF THE NAZARENE, INC.

Principal Place of Business 172 WEST HALIFAX P.O. BOX 1015 OAK HILL FL 32759

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address 172 WEST HALIFAX P.O. BOX 1015 OAK HILL FL 32759

2a. Mailing Address

Suite, Apt. #, etc.

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## FILED Feb 23, 1999 8:00 am § Secretary of State

02-23-1999 90035 013 \*\*\*\*61.25



3. Date Incorporated or Qualifed 05/18/1988

4. FEI Number

City & State   City & State   City & State   Zip   Country   Zip   Country   Zip   Country   Zip   Country   Zip   Sol   S. Certificate of Sturbus Desired   \$8.75 Additional Fee Required   S. S. Our May Be Addition   S. S. O	22		27				35 2	313132		Not	Applicable	
25	City & State	e		City & State		·····	5. Certif	cate of Status Desired		•		
28	23				Country	Country		in Canada Financia		<b>\$5.00</b>		
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  10. Name  10. Name and Address of New Registered Agent  10. Name  10. Name and Address of New Registered Agent  10. Name  10. Name  10. Name and Address of New Registered Agent  10. Name  10. Note: Registered Agent  10. Name  10. Name  10. Name  10. Name  10. Name  10. Note: Registered Agent  10. Name  10. Name  10. Note: Registered Agent  10. Name  10. Name  10. Note: Registered Agent  10. Note: Registered Agent  10. Name  10. Note: Registered Agent  10. Name  10. Note: Registered Agent  10. Note: Registered Agent  10. Note: Registered Agent  10. Name  10. Note: Registered Agent  10. Note: Registered Agent  10. Name  10. Note: Registered Agent  10. Note: Registered  10. Note: Registered Agent  10. Note: Registered	¬, '		$\vdash$	·	¬ ′						· ·	
BERRIAN, RONALD BOI CONRAD DR HIGHWAY NEW SMYRNA BEACH FL 32168  42												
BERRIAN, RONALD 801 CONRAD DR HIGHWAY NEW SMYRNA BEACH FL 32168  46 City  FL 85 Zip Code  17. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered spent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered spent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered spent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered varied of registered dayers significant required when reinstating)  DATE  OFFICERS AND DIRECTORS IN 12  OFF		9. Name and Address of Current	Register	red Agent	94	Nama	IU. Nam	e and Address of New	Kehisteren	-yent		
801 CORRAD DR HIGHWAY NEW SMYRNA BEACH FL 32168  80  81  82  83  84  84  85  86  86  87  87  88  88  88  88  88  88					"	Name						
Registered Agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, and accept the chiliquidinos of, Section 817.0503, Florida Statutes, the above-named corporation's board of directors, I hereby accept the appointment as registered agent, and accept the chiliquidinos of, Section 817.0503, Florida Statutes, the corporation's board of directors, I hereby accept the appointment as registered agent, and accept the chiliquidinos of, Section 817.0503, Florida Statutes.    Signature, Upped or printed name of registered agent agents are directors. I hereby accept the appointment as registered agent agents are directors. I hereby accept the appointment as registered agent agents are directors. I hereby accept the appointment as registered agent agents are directors. I hereby accept the appointment as registered agent agents are directors. I hereby accept the appointment as registered agent agents are directors. I hereby accept the appointment as registered agent agents are directors. I hereby accept the appointment as registered agent agents are directors. I hereby accept the appointment as registered agent agents are directors. I hereby accept the appointment as registered agent agents are directors. I hereby accept the appointment as registered agent agents are directors. I hereby accept the appointment as registered agent agents are directors. I hereby accept the appointment as registered agent agents agents agent agents are directors. I hereby accept the appointment as registered agent agents agents agents agents agents agents agents agent agent agents agent agents agent agents agent agents agent agents ag	BERRIAN, RONALD					Street A	Address (P.O. Bo	ox Number is Not Accep	table)			
Section   FL   Section	= = ·							···	<u>-</u>			
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.    International Companies of Provided International Companies of Provided International Statutes.   International Companies of Provided	NEW SMY	RNA BEACH FL 32168			83							
1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the obligations of, Section 617.0503, Florida Statutes.    SIGNATURE   Signature, typed or printed name of registered agent and the firepotents   (NOTE Registered Agent signature required when relectance)   DATE					0.4	City.		<del> </del>		85 Zin C	ode	
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At I hereby codify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information					6.4 CITY-S	r-ZIP			·			
14. Thereby definity that the information supplied with this hilling does not quality for the exemple lead of the standard of the same lead of	14. I hereby	I certify that the information supplied with	h this filin	g does not qualify for th	ne exempti	on stated	I in Section 119.	07(3)(i), Florida Statutes	. I further cer	tify that the in	formation	

4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DREW SSHEW ON RE DEW States SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER DR DIRECTOR

1-3-99 407 4235172

:R2E037 (11/98)

Applied For