FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



April

Mar 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

GRACE UNITED METHODIST CHURCH OF VENICE, INC.

dimo	OMILD MEMIODIO	SHOTT OF TEMOE, T						
Principal Place of Business		Mailing Address				110 IDII 010H I	JEBIR DIBIN HANDE B	
400 E. FIELD AVE. VENICE FL 34285-4035		400 E. FIELD AVE. VENICE FL 34285-4035		·				
					3. Date Incorporated or Qualified 02/07/1962	3a. D	02/21/19	
2. Principal P	ace of Business	2a. Mailing Address 26			4. FEI Number 59-1000629			plied For ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	X	\$8.75	Additional
City & State		City & State			6. Election Campaign Financing		Fee Re \$5.00	······
23		28			Trust Fund Contribution		Added t	
Zip 24	Country 25	Zip 29	Zip Country		This corporation has liability for Florida Statutes		e tax under s.	. 199.032,
	9. Name and Address of Curren		1	······································	10. Name and Address of New I		Agent	
······································			8	Name				***************************************
TALLMAN, LINDA			8:	Street A	Address (P.O. Box Number is Not Accept	able)		
1	LRUSS DRIVE FL 34292		B:	3	· · · · · · · · · · · · · · · · · · ·			
VEITIOL	TE OTENE		 B	City			85 Zip (Code
11 Purcuant	to the provisions of Sections 617.050	2 and 617 1508 Florida Str	tutes the abo	to named	corporation submits this statement for the	FL	m l	e registered
office or r	egistered agent, or both, in the State	of Florida. Such change wa	as authorized b	by the corp	oration's board of directors. I hereby acc	ept the ap	pointment as	registered
_	m ramilar with, and accept the obliga	ations of, aection 617,0505,	, riunua siaiuli	35.				
SIGNATURE ,	Signature, typed or printed name of registered age	int and little if applicable (NOTE: Registered A	gent signature	required when rehetating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF			ISIN 12
TITLE	DP	X DELETE		VPD	JANE AND JENNIN 3247 FALLOWA	95	Change	Addition
NAME	KINGSBURG, JENNIFER		1.2 NAMI		3247 FALLOWA	2 4		
STREET ADDRESS	2320 BAL HARBOR DRIVE		,	ET ADDRESS	Venice, F1 342	az		
CITY-ST-ZIP	VENICE FL	DELETE	1.4 CITY		Pour Cook	7 -	Change	Addition
NAME	VPD Kingsbury, Jennifer	DECENT	2.1 TITLE 2.2 NAMI	- 1	RAY COOK 1240 LEMON BAY	130	LI CHANGE	Andulion
STREET ADDRESS	2320 BAL HARBOR DR			ET ADDRESS				
CITY-SI-ZIP	VENICE FL		2.4 CITY		VENICE, FL 342	93		
TITLE	T	☐ DELETE	3.1 TITLE		KATHU PELEC		Change	Addition
NAME	JENNINGS, JANE		3.2 NAMI	٠ ا	KATHY KELSEY 609 GLEN OAK			
STREET ADDRESS	3247 FALLOW DRIVE		3.3 STRE	ET ADDRESS				
CITY-ST-7IP	VENICE FL		3.4. CITY	-ST-ZIP	VENICE, FL 34	293		
TITLE	T	DELETE	4.1 TITLE		7, 3		Change	Addition
NAME	wright, bill		4. 2 NAM	E		•		
STREET ADDRESS	1427 ROYAL RD		4.3 STRE	et address				
CITY-ST-7IP	VENICE FL		4.4 CITY	ST-ZIP				
TITLE	Т	☐ DELETE	5.1 TITLE				Change	Addition
NAME	JACOBS, RUSSELL		5.2 NAM	- 1				
STREET ADDRESS	326 FOXGLOVE RD		5.3 STRE	et address	1			
CITY-ST-ZIP	VENICE FL		5.4 CITY		·		——————————————————————————————————————	1 1 1 1 1 1 1
TITLE	<u> </u>	☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME	TALLMAN, LINDA		6.2 NAM					1
STREET ADDRESS	1728 KILRUSS DRIVE			et address				
1 CITY OF 210	VENICE EL 24202		6.4 P/TV	CT 2ID				

14. I do 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.

elman, 2/7/97