

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 703569

FILED
Apr 09, 2002 8:00 AM
Secretary of State

Entity Name: GRACE UNITED METHODIST CHURCH OF VENICE, INC.

Current Principal Place of Business:

400 E. FIELD AVE.
VENICE, FL 342854035

New Principal Place of Business:

Current Mailing Address:

400 E. FIELD AVE.
VENICE, FL 342854035

New Mailing Address:

FEI Number: 59-1000629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TALLMAN, LINDA
1728 KILRUSS DRIVE
VENICE, FL 34292 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SIMPSON, CAROL
Address: 5049 SOUTHERN PINES CIRCLE
City-St-Zip: VENICE, FL 34293

Title: P () Delete
Name: CLINE, PAUL
Address: 408 VALENCIA RD
City-St-Zip: VENICE, FL 34285

Title: T () Delete
Name: STOVER, GENE
Address: 1015 LAUREL AVE
City-St-Zip: VENICE, FL 34292

Title: T () Delete
Name: PIEL, BETH
Address: 132 RIO TERRA
City-St-Zip: VENICE, FL 34285

Title: T () Delete
Name: CAMPBELL, ED
Address: 442 W GATE DR
City-St-Zip: VENICE, FL 34285

Title: T () Delete
Name: SELL, JOHN
Address: 900 S TAMIAMI TR #609
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: ERB, CAROL
Address: 1600 PECAN ST.
City-St-Zip: NOKOMIS, FL 34275

Title: VP (X) Change () Addition
Name: CLINE, PAUL
Address: 408 VALENCIA RD
City-St-Zip: VENICE, FL 34285

Title: P (X) Change () Addition
Name: STOVER, GENE
Address: 1015 LAUREL AVE
City-St-Zip: VENICE, FL 34292

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GENE STOVER

PRES

04/09/2002

Electronic Signature of Signing Officer or Director

Date