2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 767663

1. Entity Name

GRACE UNITED METHODIST CHURCH OF LAKE MARY, INC.

FILED
Apr 17, 2000 8:00 am
Secretary of State
04-17-2000 90014 014 ****61.25

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
499 N COUNTRY CLUB RD LAKE MARY FL 32746-4230	499 N COUNTRY CLUB RD LAKE MARY FL 32746-4230

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WHIGHAM, FRANK C., ESQ.
200 W. FIRST STREET, P. O. BOX 1330
SANFORD FL 32771

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SLABACK, ARLOUINE R 206 TEMPLE DRIVE SANFORD FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BYLUND, T H "CAP" 405 N PLANTATION BLVD LAKE MARY FL 32746	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Deborah C. Rape 102 Marta Road DeBary, FL 32713 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~SO~~ D WILT, CHRISTINE 200 HURST CT. LAKE MARY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOYNT, JOHN 114 OLD HICKORY CT LONGWOOD FL 32750	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Holly Underwood 308 Oakwood Ct. Lake Mary, FL 32746 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RAISLER, ROBERT B 327 SPRINGVIEW DR SANFORD FL 32773	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COX, JAMES 180 W CRYSTAL LAKE MARY FL 32746	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Deborah C. Rape REQUIRED Deborah C Rape 4/5/00 407-3221472
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #