

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011496

FILED
May 01, 2012
Secretary of State

Entity Name: GRACEPOINTE BAPTIST CHURCH, INC.

Current Principal Place of Business:

6900 US 1 SOUTH
SAINT AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

6900 US 1 SOUTH
SAINT AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 06-1760479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICOLOSI, PHILLIP M
6900 US 1 SOUTH
SAINT AUGUSTINE, FL 32086 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: P
Name: NICOLOSI, PHILLIP M
Address: 6900 US 1 SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VP
Name: SMITH, JAMES A SR.
Address: 6900 US 1 SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: T
Name: ECHEGOYEN, DONNA
Address: 6900 US 1 SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: S
Name: NIX, KAY
Address: 6900 US 1 SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: VP
Name: HUTCHESON, JOHN MARK
Address: 6900 US 1 SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32086

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.

SIGNATURE: PHILLIP NICOLOSI

P

05/01/2012

Electronic Signature of Signing Officer or Director

Date