

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2001 8:00 am
Secretary of State

03-13-2001 90005 027 ****61.25

DOCUMENT # NO6290

1. Entity Name

GRACE BAPTIST CHURCH OF VERO BEACH, INC.

Principal Place of Business

**1285 43RD AVE
 VERO BEACH FL 32960**

Mailing Address

**1285 43RD AVE
 VERO BEACH FL 32960**

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

59-2579726

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEBBER, EDWARD S
~~700 ROYAL PALM PLACE~~ **536 S. MIRROR LAKE DR.**
~~VERO BEACH FL 32960~~
Sebastian, FL 32958

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 ☐ Delete
 NAME **LINCKS, EDWIN**
 STREET ADDRESS **7300 20TH STREET**
 CITY-ST-ZIP **VERO BEACH FL**

TITLE ☐ Change ☒ Addition
 NAME **GRABLE, Betty**
 STREET ADDRESS **8775 20th ST. #437**
 CITY-ST-ZIP **VERO Beach FL**

TITLE ☐ Delete
 NAME **POWELL, HOWARD T**
 STREET ADDRESS **8026 141ST STREET**
 CITY-ST-ZIP **SEBASTIAN FL**

TITLE ☐ Change ☒ Addition
 NAME **Feickert, Ron**
 STREET ADDRESS **310 11th Court**
 CITY-ST-ZIP **VERO Beach, FL**

TITLE ☒ Delete
 NAME **WEBBER, EDWARD**
 STREET ADDRESS **700 ROYAL PALM PLACE**
 CITY-ST-ZIP **VERO BEACH FL**

TITLE ☐ Change ☒ Addition
 NAME **Krail, John R.**
 STREET ADDRESS **2400 Indian Creek Blvd. W Apt. E119**
 CITY-ST-ZIP **VERO Beach, FL**

TITLE ☐ Delete
 NAME **JONES, PAUL**
 STREET ADDRESS **1260 OLDE DOUBLOON DR**
 CITY-ST-ZIP **VERO BEACH FL**

TITLE ☐ Change ☒ Addition
 NAME **Parker, Robert**
 STREET ADDRESS **20 Pine Arbor Lane #205**
 CITY-ST-ZIP **VERO Beach FL**

TITLE ☒ Delete
 NAME **OWENS, WILLIAM**
 STREET ADDRESS **2025 5TH ST**
 CITY-ST-ZIP **VERO BEACH FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Delete
 NAME **WEBB, DAVID**
 STREET ADDRESS **415 352TH AVE**
 CITY-ST-ZIP **VERO BEACH FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
STONER, M. R. K. Clerk

3-7-01 (561) 589 7019

Date Daytime Phone #

CR2E037 (10/00)