## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## DOCUMENT # N06290



**FILED** Feb 11, 2008 08:00 AM

GRACE BAPTIST CHURCH OF VERO BEACH, INC.					Secretary of State			
Principal Place of Business		Mailing Address						
1285 43RD AVE VERO BEACH FL 32960		1285 43RD AVE VERO BEACH FL 32960						
2. Principal Place of Business - No P.O. Box #		3. Mailing Address				likik saili 6911 elet	/ E/PII EIEII EIEII EII	
State Apt. #. etc.		Suite, Apr. #, etc.			1st MOORE CR2E037 (10/07)			
City & State		City & State			4. FEI Number			
Zip	Country	Zip	Country		5. Certificate of Status De	sired 🗀	\$8.75 Add	
	6. Name and Address of Current	Registered Agent	ered Agent		7. Name and Address of New Registered Agent			
				Name				
KRAIL, JOHN R 2400 INDIAN CREEK BLVD #E119 VERO BEACH FL 32966-2410			Stre	Street Andress (P.C. Box Number is Not Acceptable)				
			City			FI	Zip Cod	e
SIGNATURE  Signature, typed or protect care of registered agent and the Lampicace INOTE Registere  FILE NOW: FEE IS S61.25  Due By May 1, 2008  Trust Fund Contribution					\$5.00 May Be Added to Fees	Make/Chec		
10.	OFFICERS AND DIF	RECTORS	11.		ADDITIONS/CHANGES TO C	OFFICERS AND C	IRECTORS IN	I 10
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T LINCKS, EDWIN 1700 WATERFORD DR. APT 207 VERO BEACH FL 32966	ATERFORD DR. APT 207		ESS	□ Change □ Addition U00000823197 02/20/08-80028-009 61.25			
TITLE NAME STREET AUDRESS CITY-ST-ZIP	HINKLE, ROBERT  1875 48TH AVE  SIF		TITLE NAME STREET ADDRI CITY-ST-ZIP	FSC.			☐ Change	Addition .
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	T KRAIL, JOHN R 2400 INDIAN CREEK APT E119 VERO BEACH FL 32966-2410	☐ Delete	TITLE NAME STREET ADDRI CITY-ST-ZIP	FSS			☐ Change	□ Addifion
HAME STREET ADDRESS CITY-ST-ZIP	T VAN DE WALKER, R L 220 39TH CRT VERO BEACH FL 32968	☐ Delete	THEE NAME STREET ADDRE CITY-ST-Z-P	ESS			☐ Change	Addition

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

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