# FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 31 PM 12:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000003810 (9)

1. Corporation Name
GREATER GRACE BIBLE CHURCH, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 6342 FOREST HILL BLVD.<br>SUITE 191<br>W. PALM BEACH FL 33415 | 6342 FOREST HILL BLVD.<br>SUITE 191<br>W. PALM BEACH FL 33415 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/23/1993
3a. Date of Last Report: 03/08/1994
4. FEI Number: 65-0444993 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 55 South Eric Circle | 26 P.O. Box 6761 |
| Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27 |
| City & State 23 Lake Worth, FL | City & State 28 Lake Worth, FL |
| Zip 24 33463 Country 25 Palm Beach | Zip 29 33466 Country 30 Palm Beach |

9. Name and Address of Current Registered Agent

STROSS, MATTHEW
5702 CHANNEL DRIVE
W. PALM BEACH FL 33463

10. Name and Address of New Registered Agent

91 Name: Daniel Foster
92 Street Address (P.O. Box Number is Not Acceptable): 55 South Eric Circle
93
94 City: Lake Worth FL 95 Zip Code: 33463

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Pastor Daniel Foster — Pastor Daniel Foster — 7-24-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|
| TITLE | PD | 11 TITLE | PD | ☒ Change ☐ Addition |
| NAME | STROSS, MATTHEW | 12 NAME | | |
| STREET ADDRESS | 5702 CHANNEL DRIVE | 13 STREET ADDRESS | Foster, Daniel<br>55 S. Eric Circle | |
| CITY-ST-ZIP | W. PALM BEACH FL 33463 | 14 CITY-ST-ZIP | Lake Worth, FL 33463 | |
| TITLE | D | 21 TITLE | D | ☒ Change ☐ Addition |
| NAME | STROSS, SUSAN | 22 NAME | Kelley, Timothy | |
| STREET ADDRESS | 5702 CHANNEL DRIVE | 23 STREET ADDRESS | 6545 62nd Ave N. | |
| CITY-ST-ZIP | W. PALM BEACH FL 33463 | 24 CITY-ST-ZIP | Pinellas Park, FL 33465 | |
| TITLE | VD | 31 TITLE | | ☐ Change ☐ Addition |
| NAME | LAVOIE, HANK | 32 NAME | | |
| STREET ADDRESS | 6566 N. MILITARY TRAIL, LOT 429 | 33 STREET ADDRESS | | |
| CITY-ST-ZIP | W. PALM BEACH FL 33407 | 34 CITY-ST-ZIP | | |
| TITLE | SD | 41 TITLE | ST | ☒ Change ☐ Addition |
| NAME | ALTUNA, LEON | 42 NAME | Nelsen, Donna | |
| STREET ADDRESS | 2563 N.W. 49TH AVENUE, #201 | 43 STREET ADDRESS | 55 S. Eric Circle | |
| CITY-ST-ZIP | LAUDERDALE LAKES FL 33313 | 44 CITY-ST-ZIP | Lake Worth, FL 33463 | |
| TITLE | TD | 51 TITLE | D | ☒ Change ☐ Addition |
| NAME | TRINDADE, PATRICK | 52 NAME | Baldwin, Moses | |
| STREET ADDRESS | 2701 CANALSIDE DRIVE | 53 STREET ADDRESS | 5545 62nd Ave N. | |
| CITY-ST-ZIP | W. PALM BEACH FL 33463 | 54 CITY-ST-ZIP | Pinellas Park, FL 33465 | |
| TITLE | | 61 TITLE | | ☐ Change ☐ Addition |
| NAME | | 62 NAME | | |
| STREET ADDRESS | | 63 STREET ADDRESS | | |
| CITY-ST-ZIP | | 64 CITY-ST-ZIP | | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Donna Nelsen Donna Nelsen — 7-24-95 — 407-439-6142
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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