2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 19, 2004 8:00 am Secretary of State DOCUMENT # N93000003810 04-19-2004 90722 026 ****70.00 GREATER GRACE CHRISTIAN FELLOWSHIP, INC. Principal Place of Business Mailing Address 2923 S, FEDERAL HWY P.O. BOX 540993 2.3.4.5. LAKE WORTH, FL. 33454-0993 US BOYNTON BEACH, FL 33435 2. Principal Place of Business 3. Mailing Address 4172 PINE HOLLOW CIR. Suite, Apt. #, etc. Suite, Apt. #, etc. 01072004 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number 65-0444993 Applied For GREENACRES Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired Palm Bench Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DANIEL, FOSTER Street Address (P.O. Box Number is Not Acceptable) 4172 PINE HOLLOW CIRCLE LAKE WORTH, FL 33463 Zip Code FL 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, I am familiar with, and accept the obligations of registered agen 4/14/04 SIGNATURE red agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Due by May 1, 2004 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE PD ☐ Delete TITLE ☐ Change Addition FOSTER, DANIEL NAME NAME STREET ADDRESS 4172 PINE HOLLOW CIRCLE STREET ADDRESS CITY-ST-ZIP GREENACRES, FL 33463 CITY-ST-ZIP D TITLE □ Delete Change ☐ Addition KELLEY, TIMOTHY NAME NAME 62ND TERRACE NO. 5545 62ND AVE N. STREET ADDRESS STREET ADDRESS PINELLAS PARK, FL 33 781 CITY-ST-7IP PINELLAS PARK, FL CITY-ST-ZIP VD TITLE ☐ Delete TITLE Change ■ Addition HENRY "HANK" LAVOIE NAME LAVOIE, HANK NAME 5922 WICHITA DRIVE 6566 N. MILITARY TRAIL, LOT 429 STREET ADDRESS STREET ADDRESS LAKE WORTH, FL 33463 CITY-ST-7IP W. PALM BEACH, FL 33407 CITY-ST-ZIP ST ~ TITLE TITLE ☐ Delete Change - Addition WALKER, ANGINA D NAME NAME 38 ANDROS ROAD 3727 MIL LAKE CIRCLE STREET ADDRESS STREET ADDRESS PALM SPRINCS, FL 33461 CITY-ST-ZIP LAKE WORTH, FL 33463 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition BALDWIN, MOSES NAME NAME 62 40 TERRACE No. STREET ADDRESS 5545 62ND AVE N. STREET ADDRESS PINELLAS PARK, FL 33781 CITY-ST-ZIP PINELLAS PARK, FL CITY-ST-7IP TITLE Defete TITLE ☐ Chance ☐ Addition NAME NAME STREET ADDRESS 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 supplienced in the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver ontrustee 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 a other like empowered.

FILED