## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

## May 05, 2008 8:00 am Secretary of State DOCUMENT # N93000003810 05-05-2008 90258 034 \*\*\*\*70.00 GREATER GRACE CHRISTIAN FELLOWSHIP, INC. Principal Place of Business Mailing Address 116 SWAIN BLV P.O. BOX 540993 LAKE WORTH, FL 33463 LAKE WORTH, FL 33454-0993 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address P.O. BOX 540993 4172 PINEHOLLOWCIE Suite, Apt. #, etc. Suite, Apt. #, etc. 01292008 Chq-NP CR2E037 (12/06) 4. FEI Number 65-0444993 City & State City & State Applied For GLEENACRES ake Worm, Fl Not Applicable Country U.S Zip \$8.75 Additional 5. Certificate of Status Desired <u>33454-0993</u> Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FOSTER DANIEL, FOSTER 116 SWAIN BLVD ress (P.O. Box Number is Not Acceptable) LAKE WORTH, FL 33463 GREENACRES 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 red ager the obligations of regis SIGNATURE (NOTE; Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Due by May 1, 2008 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11 TITLE PΝ ☐ Delete TITLE ☐ Change ☐ Addition FOSTER, DANIEL NAME NAME STREET ADDRESS 4172 PINE HOLLOW CIRCLE STREET ADDRESS CITY-ST-71P GREENACRES, FL 33463 CITY-ST-ZIP ☐ Defete Change ■ Addition TITLE MLE NAME ALBERTO, LAWRENCE NAME STREET ADDRESS 834 PEPPERTREE COURT STREET ADDRESS CHY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-ZIP Delete ☐ Change ☐ Addition-TITLE TITLE LAVOIE, HANK NAME NAME 5922 WICHITA DR. STREET ADDRESS STREET ADORESS LAKE WORTH, FL 33463 CITY-ST-ZIP CITY-ST-ZIP THE Delete TITLE Change ☐ Addition WALKER, ANGINA D NAME NAME STREET ADDRESS 38 ANDROS RD. STREET ADDRESS PALM SPRINGS, FL 33461 CITY-ST-ZIP CITY-ST-ZIP Change Addition: TITLE ☐ Delete TITLE GARLINGHOUSE, IRA NAME 2112 SW 22ND ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33426 CITY-ST-ZIP Delete ☐ Channe ☐ Addition IIILE IIII F DONALD J. BRUNTY NAME NAME 172 OLD MEADOW WAY STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-7IP PALM BEACH GARDENS, FL 33418 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplier and 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 of inuspee 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 attactment withigh a pudress, with all other like empowered.

4/30/08

**FILED**