

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90012 015 ****61.25

DOCUMENT # N194000000671

1. Entity Name
Grace Family Church of North Tampa, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5101 Van Dyke Rd
Suite, Apt. #, etc.

3. Mailing Address
5101 Van Dyke Rd
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Lutz FL

City & State
Lutz FL

4. FEI Number
59-3223784

Applied For
Not Applicable

Zip
33558

Country
USA

Zip
33558

Country
USA

5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Craig Altman

Street Address (P.O. Box Number is Not Acceptable)
13521 Westshire Dr.

City
Tampa FL

FL Zip Code
33618

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

FEE IS \$61.25
Initial or Amended UBR

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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	A.P. Altman, Craig 13521 Westshire Dr. Tampa FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	A.P. Bentley, Christian 16706 Valley Dr. Tampa FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S.T. Hindus, Douglas 15142 Nighthawk Tampa FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D. Sutton, Joy 17325 Linda Vista Circle Lutz FL 33558
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D. Conbin, Keith 13732 Westshire Dr. Tampa FL 33618
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D. Ael Monte Angel 13517 Westshire Dr. Tampa FL

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**DO NOT WRITE
IN THIS SPACE**

11. 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  CHRISTIAN D. BENTLEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/02 (813) 965-4157
Date Daytime Phone #