## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Jan 22, 2000 8:00 am Secretary of State DOCUMENT # N96000004467 1. Entity Name SOVEREIGN GRACE CHURCH, INC. 01-22-2000 90035 002 \*\*\*\*61.25 Principal Place of Business Mailing Address 6750 SO US 1 6750 SO US 1 TITUSVILLE FL 32780 TITUSVILLE FL 32780-8050 C0009249 LIS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3408005 Not Applicable Zip Zip Country \$8.75 Additional .5. Certificate of Status Desired 🕝 🔲 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MERWIN, TIM 6750 SOUTH US 1 #1 TITUSVILLE FL 32780 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change Addition VANIEL 4. JONES NAME MERWIN, TIM NAME STREET ADDRESS 633 OAKWOOD PLACE STREET ADDRESS 4145 TAN TREE DENE CITY-ST-ZIP CITY-ST-ZIP TITUSVILLE FL 32780 TITLE Delete TITLE Change Addition NAME MERWIN, LARRY NAME STREET ADDRESS STREET ADDRESS 6750 S.US 1 STE:2-CITY-ST-ZIP CITY-ST-ZIP TITUSVILLE FL 32780 Delete TITLE ☐ Change ☐ Addition COX, JAMES NAME STREET ADDRESS STREET ADDRESS 4385 CAMBERLY COURT CITY-ST-ZIP CITY-ST-ZIP COCOA FL 32927 TITLE Delete TITLE Change ☐ Addition PATRICK, RICK NAME STREET ADDRESS STREET ADDRESS 2550 WHITE OAK DRIVE CITY-ST-ZIP CITY-ST-ZIP TITUSVILLE FL TITLE Delete TITLE ☐ Change ☐ Addition ANDIS, KEN NAME NAME STREET ADDRESS STREET ADDRESS 1708 SO EDEN CIRCLE CITY-ST-ZIP CITY-ST-ZIP TITUSVILLE FL TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filling 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 Block 11 if

changed, or on an attachment with an address, with all other like empowered 301-854-6301 SIGNATURE