## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000004467

Address:

127 VARSITY CIRCLE

City-St-Zip: ALTAMONTE SPRINGS, FL 32714

SOVEREIGN GRACE CHURCH, INC.

FILED Jan 11, 2005 Secretary of State

Entity Name: Sovereign Grace Church, Inc.						
Current Principal Place of Business:				New Principal Place of Business:		
SUITE 1	VASHINGTON	US		6750 SO. WASHINGTON SUITE 5 TITUSVILLE, FL 32780	US	
TITUSVILLE, FL 32780 US  Current Mailing Address:				New Mailing Address:		
SUITE 1	VASHINGTON E, FL 32780	US		6750 SO. WASHINGTON SUITE 5 TITUSVILLE, FL 32780	US	
FEI Number:	59-3408005	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
MERWIN, TIM 6750 SO. WASHINGTON SUITE 1 TITUSVILLE, FL 32780 US				MERWIN, TIM 6750 SO. WASHINGTON SUITE 5 TITUSVILLE, FL 32780 US		
The above in the State		ubmits this statement for the pເ	ırpose o	f changing its registered of	fice or registered agent, or both,	
SIGNATURE:				01/11/2005		
Electronic Signature of Registered Agent					Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DP () [ MERWIN, TIM 3663 FRAZIER O TITUSVILLE, FL			Title: ( ) Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () [ JONES, DANIEL 4145 TALL TREE ORLANDO, FL 3	DR		Title: ( ) Name: Address: City-St-Zip:	Change ( ) Addition	
Title:	D ()[	Delete IF		Title: ( )	Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: LARRY D. MERWIN ADMI 01/11/2005