2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2006
Secretary of State

DOCUMENT# N96000005908

Entity Name: GRACE TABERNACLE CHURCH AND MINISTRIES OF FORT WALTON BEACH, INC.

Current Principal Place of Business:

218 EGLIN PARKWAY NE
FORT WALTON BEACH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

218 EGLIN PKWAY NE
FORT WALTON BEACH, FL 32547 US

New Mailing Address:

FEI Number: 59-3412131 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MALHEIRD, DAVID M.
325 SUDDUTH CIRCLE
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

MALHEIRO, DAVID M.
325 SUDDUTH CIRCLE
FORT WALTON BEACH, FL 32547 US

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: DAVID MALHEIRO 07/05/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MALHEIRO, DAVID
Address: 325 SUDDUTH CIRCLE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: STD ( ) Delete
Name: PATRICK, LARRY B
Address: 221 YACHT CLUB DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D ( ) Delete
Name: PARKER, JAMES A
Address: P.O. BOX 888
City-St-Zip: MARY ESTHER, FL 32569

Title: D ( ) Delete
Name: HOWELL, STAATS
Address: 640 NE POWELL DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: BROWN, JOE
Address: 94 RUBY CIRCLE
City-St-Zip: MARY ESTHER, FL 32569

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

SIGNATURE: DAVID MALHEIRO PD 07/05/2006
Electronic Signature of Signing Officer or Director Date