

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90138 013 *****70.00

DOCUMENT # N97000000477

1. Entity Name

GRACE INTERNATIONAL CHURCH, INC.



Principal Place of Business

**6611 RAMONA BLVD
JACKSONVILLE FL 32205
US**

Mailing Address

**P.O. BOX 77298
JACKSONVILLE FL 32218**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

32226

4. FEI Number **59-3406269**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FIELDS, LOUIS J JR
1232 SQUIRREL LANE SOUTH
JACKSONVILLE FL 32218**

Name

SAME

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

10905 Lydia Estates Dr.

City

Jacksonville

FL

Zip Code

32218

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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FIELDS, LOUIS J JR 1232 SQUIRREL LANE SOUTH JACKSONVILLE FL 32218	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FIELDS, LISA L 1232 SQUIRREL LANE SOUTH JACKSONVILLE FL 32218	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FIELDS, BARBARA 5740 VERNON RD JACKSONVILLE FL 32209	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 10905 Lydia Estates Dr. Jacksonville, FL 32218
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 10905 Lydia Estates Dr. Jacksonville, FL 32218
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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.

SIGNATURE:

SIGNATURE REQUIRED Fields, Jr. (Pres.) 3-13-03 904-693-4464

CR2E037 (10/02)