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CORPORATE CORPORATIONS

95 FEB 23 PM 4:20

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N02320 (2)
1. Corporation Name
GRACE CHRISTIAN CENTER, INC.

Principal Place of Business 3301 N 72ND AVE HOLLYWOOD FL 33024 US	Mailing Address 15068 SW 10 ST SUNRISE FL 33326
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/02/1984	3a. Date of Last Report 01/19/1994
4. FEI Number 59-2412635	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent
**RISI, RICHARD D.
15068 SW 10 ST.
SUNRISE FL 33326**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	RISI, RICHARD D.	1.2 NAME	
STREET ADDRESS	15068 SW 10 ST	1.3 STREET ADDRESS	
CITY, ST, ZIP	SUNRISE FL	1.4 CITY, ST, ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	RISI, PATRICE L.	2.2 NAME	
STREET ADDRESS	15068 SW 10 ST	2.3 STREET ADDRESS	
CITY, ST, ZIP	SUNRISE FL	2.4 CITY, ST, ZIP	
TITLE	STD	3.1 TITLE	☐ Change ☐ Addition
NAME	RISI, ANTHONY J.	3.2 NAME	
STREET ADDRESS	1116 NW 130TH TERRACE	3.3 STREET ADDRESS	
CITY, ST, ZIP	SUNRISE FL	3.4 CITY, ST, ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	POETSCHKE, MARY B.	4.2 NAME	
STREET ADDRESS	14201 SW 41ST STREET	4.3 STREET ADDRESS	
CITY, ST, ZIP	MIRAMAR FL	4.4 CITY, ST, ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	POETSCHKE, SHERRY	5.2 NAME	
STREET ADDRESS	1591 NW 102ND TERRACE	5.3 STREET ADDRESS	
CITY, ST, ZIP	PEMBROKE PINES FL 33029	5.4 CITY, ST, ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	AVELLO, DOMINIC	6.2 NAME	
STREET ADDRESS	3910 SW 56TH CT	6.3 STREET ADDRESS	
CITY, ST, ZIP	FT LAUDERDALE FL 33312	6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **RICHARD RISI, PRES.** 2/22/95 305-983-6497
(Signature of person filing)