### 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 767663** 

Entity Name: GRACE UNITED METHODIST CHURCH OF LAKE MARY, INC.

FILED
Jan 08, 2014
Secretary of State
CC6203403911

# **Current Principal Place of Business:**

499 N COUNTRY CLUB RD LAKE MARY. FL 32746-4230

## **Current Mailing Address:**

499 N COUNTRY CLUB RD LAKE MARY, FL 32746-4230 US

FEI Number: 59-6140311 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GALLAGHER, F. MICHAEL 499 N. COUNTRY CLUB RD. LAKE MARY, FL 32746-4230 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	TRST	Title	S

 Name
 COX, JIM
 Name
 HOLTZAPPLE, MARY C

 Address
 774 POND VIEW COURT
 Address
 301 KINGSBURY AVE

 City-State-Zip:
 LAKE MARY FL 32746
 City-State-Zip: SANFORD FL 32771

Title PSTR Title FCHR

NameJULIANO, J.DAVIDNameCHATMAN, WINIFREDAddress499 NORTH COUNTRY CLUB RDAddress119 ESTATES CIRCLECity-State-Zip:LAKE MARY FL 32746City-State-Zip:LAKE MARY FL 32746

Title T Title CHRM

Name DIEHL, BARBARA Name KLUGH, BEN

Address 1810 D LANDING DRIVE Address 111 EAST GREENTREE LANE

City-State-Zip: SANFORD FL 32771 City-State-Zip: LAKE MARY FL 32746

I hereby 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 all other like empowered.

SIGNATURE: MARY HOLTZAPPLE

**SECRETARY** 

01/08/2014