

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02647

Entity Name: GULFVIEW GRACE BRETHREN CHURCH, INC.**Current Principal Place of Business:**6639 HAMMOCK ROAD
PORT RICHEY, FL 34668**Current Mailing Address:**6639 HAMMOCK ROAD
PORT RICHEY, FL 34668**FEI Number: 59-2399459****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**POYNER, PAUL R. REV.
6639 HAMMOCK ROAD
PORT RICHEY, FL 34668 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: PAUL POYNER****04/30/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name GIBBS, RUTH
Address 11124 PINE TREE LANE
City-State-Zip: PORT RICHEY FL 34668

Title ASST. TREASURER, OFFICER
Name GOSSETT, RANDALL W
Address 7419 CANVASBACK DRIVE
City-State-Zip: NEW PORT RICHEY FL 34654

Title PASTOR, OFFICER
Name POYNER, PAUL R REV.
Address 18963 DIEGO CIRCLE
City-State-Zip: SPRING HILL FL 34610

Title CHAIRMAN
Name LAWDERMILT, LARRY
Address 10735 MIRACLE LN.
City-State-Zip: NEW PORT RICHEY FL 34654

Title ADMINISTRATIVE ASSISTANT
Name TRUMBLE, KRYSTAL LYNN
Address 10933 HILLCREST AVE
City-State-Zip: PORT RICHEY FL 34668

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: PAUL POYNER**PASTOR, OFFICER****04/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date