

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000008889

Entity Name: BARBARA MEMORIAL GRACE CHURCH, INC.**Current Principal Place of Business:**155 NORTH EAST NAZARENE CHURCH WAY
MADISON, FL 32340**Current Mailing Address:**155 NORTH EAST NAZARENE CHURCH WAY
MADISON, FL 32340**FEI Number: 61-1646369****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**AGNER, ROBERT REV.
155 NORTH EAST NAZARENE CHURCH WAY
MADISON, FL 32340 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	D/P	Title	D/VP
Name	AGNER, ROBERT REV.	Name	WILLIAMS, JOHNNIE L
Address	160 NE CHICORY TRL.	Address	323 NE CHICORY TRL
City-State-Zip:	MADISON FL 32340	City-State-Zip:	MADISON FL 32340
Title	SD	Title	TD
Name	JOOST, BEVERLY J	Name	JOOST, BEVERLY J
Address	295 NE CHICORY TRL	Address	295 NE CHICORY TRAIL
City-State-Zip:	MADISON FL 32340	City-State-Zip:	MADISON FL 32340

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: ROBERT Q AGNER**PRESIDENT****04/25/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date