

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41780

Entity Name: GRACE UNITED METHODIST CHURCH, INC.**Current Principal Place of Business:**1822 MADISON STREET
LAWTEY, FL 32058**Current Mailing Address:**1822 MADISON ST.
LAWTEY, FL 32058 US**FEI Number:** 59-3187572**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PRIEST, SHELLEE S
22535 PINE STREET
LAWTEY, FL 32058 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:** SHELLEE S PRIEST

05/13/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TRUSTEE
Name	THOMAS, DOYLE
Address	1822 MADISON ST.
City-State-Zip:	LAWTEY FL 32058

Title	TREASURER
Name	PRIEST, SHELLEE S
Address	22535 PINE STREET LAWTEY
City-State-Zip:	FL FL 32058

Title	TRUSTEE
Name	MOSLEY, LAWRENCE
Address	1822 MADISON ST. LAWTEY
City-State-Zip:	FL FL 32058

Title	TRUSTEE
Name	DAVIS, PRISCILLA
Address	1822 MADISON STREET
City-State-Zip:	LAWTEY FL 32058

Title	TRUSTEE
Name	SHUFORD, GLORIA
Address	1822 MADISON ST.
City-State-Zip:	LAWTEY FL 32058

Title	TRUSTEE
Name	ROSADO, JONATHAN
Address	1822 MADISON STREET
City-State-Zip:	LAWTEY FL 32058

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: SHELLEE S PRIEST**TREASURER**

05/13/2017

Electronic Signature of Signing Officer/Director Detail

Date