

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701449

Entity Name: GRACE PRESBYTERIAN CHURCH, INC.

FILED
Feb 16, 2004
Secretary of State

Current Principal Place of Business:

10991 58 ST NO
PINELLAS PK, FL 34666 US

New Principal Place of Business:

Current Mailing Address:

10991 58 ST NO
PINELLAS PK, FL 34666 US

New Mailing Address:

FEI Number: 59-2468444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURRIDGE, ROBERT N., JR. (REV)
10991 58TH STREET N
PINELLAS PARK, FL 34666 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BROWN, THOMAS K,
Address: 10999 74TH AVE N
City-St-Zip: SEMINOLE, FL 33772 US

Title: D () Delete
Name: BOENKER, KURT
Address: 7001 142 AVE.N #338
City-St-Zip: LARGO, FL 34641

Title: D (X) Delete
Name: JOHNSON, WILLIAM
Address: 11147 57 AVENUE NORTH
City-St-Zip: SEMINOLE, FL

Title: VP () Delete
Name: BROWN, THOMAS K JR
Address: 11018 FREEDOM WAY
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BROWN, THOMAS K SR
Address: 10999 74TH AVE N
City-St-Zip: SEMINOLE, FL 33772 US

Title: D (X) Change () Addition
Name: HAYMAN, DOUG
Address: 2273 HIDDEN MEADOWS DR E
City-St-Zip: PALM HARBOR, FL 34683

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BROWN, THOMAS K

P

02/16/2004

Electronic Signature of Signing Officer or Director

Date