

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 702711

FILED
Jul 21, 2003
Secretary of State

Entity Name: GRACE EVANGELICAL LUTHERAN CHURCH OF ORMOND BEACH, FLORIDA, INC.

Current Principal Place of Business:

ORMOND BEACH FLORIDA INC
338 OCEAN SHORE BLVD.
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

ORMOND BEACH FLORIDA INC
338 OCEAN SHORE BLVD.
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 59-1115622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARNES, VIRGINIA K REV.
49 PALM DRIVE
ORMOND BEACH, FL 32176

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: SD () Delete
Name: JOHNSON, DAVID
Address: 482 MAGNOLIA ST
City-St-Zip: ORMOND BEACH, FL 32176

Title: TD () Delete
Name: DEMETER, DOROTHY,
Address: 1105 WANDERING OAKS DR
City-St-Zip: ORMOND BCH, FL

Title: PD () Delete
Name: BUCKWALTER, MARY
Address: 7 BAYWOOD DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: DV () Delete
Name: BOETTCHER, FRED
Address: 28 MARJORIE TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: BOETTCHER, FRED
Address: 28 MARJORIE TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

Title: TD (X) Change () Addition
Name: DEMETER, DOROTHY,
Address: 1105 WANDERING OAKS DR
City-St-Zip: ORMOND BCH, FL 32174

Title: SD (X) Change () Addition
Name: BUCKWALTER, MARY
Address: 7 BAYWOOD DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: PD (X) Change () Addition
Name: BERGE, NORMAN
Address: 121 DEER RUN LAKE DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

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: NORMAN BERGE

PD

07/21/2003

Electronic Signature of Signing Officer or Director

Date