

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-10-2003 90197 011 ****61.25

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DOCUMENT # 714722

1. Entity Name
GRACE TEMPLE CHURCH OF THE LIVING GOD, INC.



Principal Place of Business
**7431 S OLD FLORAL CITY ROAD
FLORAL CITY FL 34436
US**

Mailing Address
**806 LEROY BELLAMY ROAD
INVERNESS FL 34450
US**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Mailing Address

Grace Temple CLG

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P.O. Box 243

City & State

City & State

Floral City, FL

Zip

Country

Zip

Country

34436

U.S.

4. FEI Number **59-6518320**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BELLAMY, LEROY
806 LEROY BELLAMY RD
INVERNESS FL 32650**

Name **BELLAMY, LEROY (NEW ADDRESS)**
Street Address (P.O. Box Number is Not Acceptable)
402 WASHINGTON STREET
INVERNESS FLORIDA
City **FL** Zip Code **34450**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **LEROY BELLAMY** **president & Director**
Signature, typed or printed name of registered agent and title if applicable

2-6-03
DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BELLAMY, CLADYS 416 WASHINGTON AVE INVERNESS FL 34450	Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BELLAMY, PRISCILLA 806 LEROY BELLAMY RD INVERNESS FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILLIAM, JULIA 3649 JONAH PL INVERNESS FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	KATIE MAE BELLAMY 402 WASHINGTON STREET INVERNESS FL 34450	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Gladys Bellamy 311 Deer Run Rd INVERNESS, FL 34453	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WILLIAM, JULIA 3649 JONAH PL INVERNESS FL 34452	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert R. Key P.O. Box 1272 INVERNESS FL 34451	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **LEROY BELLAMY**
Signature, typed or printed name of signing officer or director

1-24-03 (352) 726-1715
Date Daytime Phone #

CR2E037 (10/02)