## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 22 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

SIGNATURE:

718412

(0)

## GRACE BIBLE BAPTIST CHURCH, INC.

Principal Place	of Business	Mailing Address	Mailing Address			
1703 W. LEWIS ROAD POST OFFICE BOX 700NA FRUITLAND PARK FL 34731		LEWIS ROAD OFF HIGHWAY 468 PO BOX 700 FRUITLAND PARK FL 34731-0700				
US						3. Date Incorporated or Qualified 04/27/1970 03/18/1996
2. Principal Place of Business		2a. Mailing Address 26				4. FEI Number Applied For 59-1584634 Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired Security Securi
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be
<b>23</b> Zip	Country	28	Cou	intry		Trust Fund Contribution Added to Fees  8. This corporation has liability for intangible tax under s. 199.032,
24	25	29	30	<b>,</b>		Florida Statutes
	9. Name and Address of Curren		1	Ĭ		10. Name and Address of New Registered Agent
				61	Name	)
MULFORD, GEORGE A. I					Street A	t Address (P.O. Box Number is Not Acceptable)
1703 LEWIS RD						And the first section of the the end of the
LEESBURG FL 34748				83		
				84	City	FL 85 Zip Code
11 Purcuant t	a the provisions of Spetions 617.050	2 and 617 1509. Florida State	on the n	b 50 v 6	namad	7 447 )
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
_	m tamiliar with, and accept the obliga	itions of, Section 617.0503, Fig	orida Stai	tutes		
SIGNATURE _	Signature typed or printed name of registered ager	nt and little if applicable (NOT)	E: Registere	d Age	nt signature	re required when reinstating) DATE
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	SD	☐ DELETE	1.1 TI	TLE		Change Addition
NAME	BROWN, BOB		1.2 N	AME		CONVERT BOLANCES
STREET ADDRESS	609 CATAWBA ST		1.3 \$	1.3 STREET ADDRESS		900 ELM AVEN
CITY-ST-ZIP	FRUITLAND PK. FL		1.4 C	1.4 CITY-ST-ZIP		Govert Assors Achange L'Addition 900 Elm Ave. Puttured Park Ph 34731
TITLE	<b>VD</b> □ DELETE		2.1 TI	2.1 TITLE		Change Addition
NAME	BRIGHURST, MONTE		2.2 N			
STREET ADDRESS	37835 HARRIS LAKE RD		2.3 \$	2.3 STREET ADDRESS		
CITY - ST - ZIP	LADY LAKE FL	en 1.5-1.5-1.5	2. 4 CITY-ST-		T-ZIP	
TITLE	CD	[_] DELETE	3.1 TI			Change Addition
NAME	LEWIS, RAY		3.2 N			
STREET ADDRESS	507 LEWIS ST FRUITLAND PARK FL				address	
CITY-ST-ZIP TITLE	PRUITCAND PARK FL	DELETE	3.4. C	ITY-S	II - ZIP	☐ Change ☐ Addition
NAME		Dittit	4.2 N			La change La Addition
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			1	TY-SI		
TITLE		DELETE	5.1 TI			☐ Change ☐ Addition
NAME			5.2 N			
STREET ADDRESS			5.3 S	TREET	ADDRESS	
CITY-ST-ZIP			5.4 C	ITY-\$	T-21P	
TITLE		☐ DELETE	6.1 TI			☐ Change ☐ Addition
NAME			6.2 N	AME		
STREET ADDRESS			6.3 S	TREET	address	
CITY-ST-ZIP				ITY-S		
						stated in Section 119.07(3)(i), Florida Statutes. I further certify that the add that my signature shall have the same legal effect as if made under oath; that
I am an of	ficer or director of the corporation or n Block 12 or Block 13 if changed, or	the receiver or trustee empow	rered to e	ехес	ute this r	report as required by Chapter 617, Florida Statutes; and that my name