


**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Mar 08, 2004 8:00 am**  
**Secretary of State**

03-08-2004 90042 014 \*\*\*\*70.00

<b>DOCUMENT # 718412</b>			
1. Entity Name <b>GRACE BIBLE BAPTIST CHURCH, INC.</b>			
Principal Place of Business <b>1703 W. LEWIS ROAD POST OFFICE BOX 700NA FRUITLAND PARK FL 34731 US</b>		Mailing Address <b>LEWIS ROAD OFF HIGHWAY 468 PO BOX 700 FRUITLAND PARK FL 34731-0700</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>59-1584634</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>MULFORD, GEORGE A. I 1703 LEWIS RD LEESBURG FL 34748</b>		Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>Make Check Payable to Florida Department of State</b>			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<b>P</b>	TITLE	<b>V</b>
NAME	<b>MULFORD, GEORGE A 111</b>	NAME	<b>WNUK, JEROME P</b>
STREET ADDRESS	<b>1703 LEWIS RD</b>	STREET ADDRESS	<b>2010 VINE ST.</b>
CITY-ST-ZIP	<b>LEESBURG FL 34748</b>	CITY-ST-ZIP	<b>LEESBURG, FL 34748</b>
TITLE	<b>D</b>	TITLE	<b>TD</b>
NAME	<b>DAWSON, LUKE</b>	NAME	<b>KREAMER, CLIFTON G.</b>
STREET ADDRESS	<b>6113 WADE STREET</b>	STREET ADDRESS	<b>2617 CARIBE DRIVE</b>
CITY-ST-ZIP	<b>LEESBURG FL 34748</b>	CITY-ST-ZIP	<b>LADY LAKE, FL 32159</b>
TITLE	<b>V</b>	TITLE	<b>D</b>
NAME	<b>WELCH, W DALE</b>	NAME	<b>HOCHSTETLER, DENNIS</b>
STREET ADDRESS	<b>2345 SOUTH ST APT 34</b>	STREET ADDRESS	<b>121 AZALEA TRAIL</b>
CITY-ST-ZIP	<b>LEESBURG FL 34748</b>	CITY-ST-ZIP	<b>LEESBURG, FL 34748</b>
TITLE	<b>SD</b>	TITLE	<b>D</b>
NAME	<b>GAUSE, STAN</b>	NAME	<b>HEITZ, KENNETH R.</b>
STREET ADDRESS	<b>33719 OVERTON</b>	STREET ADDRESS	<b>25200 RIVER CREST DRIVE</b>
CITY-ST-ZIP	<b>LEESBURG FL 34788</b>	CITY-ST-ZIP	<b>LEESBURG, FL 34748</b>
TITLE	<b>TD</b>	TITLE	<b>D</b>
NAME	<b>LEWIS, RAY</b>	NAME	<b>EMOND, WALTER F.</b>
STREET ADDRESS	<b>507 LEWIS ST</b>	STREET ADDRESS	<b>4037 BERGEN HALL RD.</b>
CITY-ST-ZIP	<b>FRUITLAND PARK FL 34731</b>	CITY-ST-ZIP	<b>FRUITLAND PARK, FL 34731</b>
TITLE	<b>D</b>	TITLE	<b>D</b>
NAME	<b>MORNEAU, GEORGE</b>	NAME	<b>FAURÉ, GEORGE C.</b>
STREET ADDRESS	<b>PO BOX 2181</b>	STREET ADDRESS	<b>25315 Hibiscus St.</b>
CITY-ST-ZIP	<b>MINNEOLA FL 34755</b>	CITY-ST-ZIP	<b>LEESBURG, FL 34748</b>
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: <i>Rev. George A. Mulford</i>		02/25/04 (352) 326-5738	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	