

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 07, 2009
Secretary of State**

DOCUMENT# 719986

Entity Name: GRACE BIBLE CHURCH OF CAPE CANAVERAL, INC.

Current Principal Place of Business:

CAPE CANAVERAL INC
408 TYLER AVE
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

Current Mailing Address:

CAPE CANAVERAL INC
408 TYLER AVE
CAPE CANAVERAL, FL 32920

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MURPHY, NANCY L DST
408 TYLER AVENUE
CAPE CANAVERAL, FL 32920 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: PD () Delete
Name: MURPHY, J.D.,
Address: 408 TYLER AVE.
City-St-Zip: CAPE CANAVERAL, FL

Title: V () Delete
Name: TUCKER, LARRY
Address: 3617 BANNOCK ST
City-St-Zip: COCOA, FL 32926

Title: DST () Delete
Name: MURPHY, N. L.,
Address: 408 TYLER AVE.
City-St-Zip: CAPE CANAVERAL, FL

Title: D () Delete
Name: FISHER, C.C.
Address: 408 TYLER AVENUE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: FISHER, CRAIG W JR
Address: 87 LUCAS RD
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 exemption stated in Chapter 119, 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: NANCY L. MURPHY

DST

01/07/2009

Electronic Signature of Signing Officer or Director

_____ Date