

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2008 8:00 am**  
**Secretary of State**

04-14-2008 90024 016 \*\*\*\*61.25

<b>DOCUMENT # 730507</b> 1. Entity Name <b>GRACE WORLD OUTREACH CHURCH, INC., OF BROOKSVILLE, FLORIDA</b>					
Principal Place of Business <b>20366 CORTEZ BLVD BROOKSVILLE, FL 34605</b>			Mailing Address <b>20366 CORTEZ BLVD BROOKSVILLE, FL 34605</b>		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>58-2240497 59-1554133</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>GARCIA, DAVID A. 13407 BONITA AVE SPRING HILL, FL 34609</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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: _____ (NOTE: Registered Agent signature required when reinstating)					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <b>THORNTON, JOHN</b> <b>10038 WEATHERLY RD</b> <b>BROOKSVILLE, FL</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="font-size: 2em; text-align: center;">See Attached</div>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>GARCIA, DAVID A</b> <b>13407 BONITA AVE</b> <b>SPRING HILL, FL</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 information.					
<b>SIGNATURE:</b> _____			Date		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <b>David A Garcia</b> President			Daytime Phone # <b>352-796-3685</b>		

ATTACHMENT  
40066761  
#730507

Council of Trustees

T  
Richard Hanes  
5744 Seaview Blvd.  
Hudson, FL 34667

T  
Butch House  
2155 Melanie Dr.  
Homosassa, FL 34448

T  
George Gari  
PO Box 10194  
Brooksville, FL 34603

T  
Woody Leung  
4466 Plumosa St.  
Spring Hill, FL 34607

T  
Ed Tafelski  
6393 Pine Ridge Dr  
Brooksville, FL 34602

T  
Gregory Vazquez  
5058 Breakwater Blvd.  
Weeki Wachee, FL 34607

T  
Jeff West  
19049 Powell Rd  
Brooksville, FL 34601

T  
Cal Williams  
12266 Fairway Ave.  
Brooksville, FL 34613

T  
Ken Woodruff  
4195 Neff Lake Rd.  
Brooksville, FL 34601