


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2006 8:00 am
Secretary of State

04-04-2006 90144 019 ****61.25

DOCUMENT # 730646		
1. Entity Name GRACE BIBLE FELLOWSHIP INC.		
Principal Place of Business 2600 TAMiami TRAIL NOKOMIS FL 34274		Mailing Address 732 GUILD DRIVE VENICE FL 34285
2. Principal Place of Business 2600 TAMiami TRAIL NORTH	3. Mailing Address 2600 TAMiami TRAIL NORTH	
Suite, Apt. #, etc.		City & State NOKOMIS, FL
City & State NOKOMIS, FL		City & State NOKOMIS, FL
Zip 34275	Country USA	Zip 34275
Country USA		4. FEI Number 23-7420587
5. Certificate of Status Desired <input type="checkbox"/>		Applied For <input type="checkbox"/> Not Applicable
		\$8.75 Additional Fee Required



1st MOORE CR2E037 (10/05)

6. Name and Address of Current Registered Agent RILEY, JEFFREY 2314 SW 44TH ST CAPE CORAL FL 33914		7. Name and Address of New Registered Agent Name HANEWINCKEL, RICHARD Street Address (P.O. Box Number is Not Acceptable) 3420 VILLAGE GREEN DRIVE City SARASOTA FL Zip Code 33705	
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 <i>Richard Hanewinkel</i>		DATE 03/19/2006	
Signature typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)	

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	C	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RILEY, JEFFREY		NAME	BROCK, ROBERT	
STREET ADDRESS	2314 SW 44TH ST		STREET ADDRESS	6260 12th ST. S	
CITY-ST-ZIP	CAPE CORAL FL 33914		CITY-ST-ZIP	ST. PETERSBURG, FL 33705	
TITLE	T	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NORTON, HENRY		NAME		
STREET ADDRESS	11816 WINDING WOODS WAY		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34202		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALBRECHT, KAREN		NAME		
STREET ADDRESS	732 GUILD DR		STREET ADDRESS		
CITY-ST-ZIP	VENICE FL 34285		CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MYERS, ELVIN		NAME	THOMAS, RON	
STREET ADDRESS	6092 ORCHIS RD		STREET ADDRESS	4349 NATALE DR	
CITY-ST-ZIP	VENICE FL 34293		CITY-ST-ZIP	VENICE, FL 34293	
TITLE	T	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALBRECHT, FRANK		NAME		
STREET ADDRESS	732 GUILD DR		STREET ADDRESS		
CITY-ST-ZIP	VENICE FL 34285		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	C/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANEWINCKEL, RICHARD		NAME	HANEWINCKEL, RICHARD	
STREET ADDRESS	3420 VILLAGE GREEN DRIVE		STREET ADDRESS	3420 VILLAGE GREEN DRIVE	
CITY-ST-ZIP	SARASOTA FL 33705		CITY-ST-ZIP	SARASOTA, FL 33705	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 like empowered.

SIGNATURE: *Richard Hanewinkel* DATE: **03/19/2006**