2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735584

Entity Name: GRACE OPEN BIBLE CHURCH, INC.

FILED Apr 20, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1701 HIGHWAY 95A BOX 261						
CANTONMENT, FL 325339322						
Current Mailing Address:				New Mailing Address:		
1701 HIGHWAY 95A BOX 261 CANTONMENT, FL 325339322						
FEI Number: 59-2266641 FEI Number Applied For () FEI Num				nber Not Applicable () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
PHILLIPS, RICHARD A REV 1165 CLYMIL DRIVE CANTONMENT, FL 32533 US						
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:				ADDITION	S/CHANGE	ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PD (PIERSON, ROS 160 CEDAR TE CANTONMENT	REE LANE		Title: Name: Address: City-St-Zip:	1165 CLYMI	(X) Change ()Addition ICHARD A REV. L DRIVE NT, FL 32533
Title: Name: Address: City-St-Zip:	STD (BOOKER, GEA 1430 WISBON CANTONMENT	E ROAD		Title: Name: Address: City-St-Zip:	STD BOOKER, G 1430 WISBO CANTONME	
Title: Name: Address: City-St-Zip:	D (PIERSON, ROS 160 CEDAR TE CANTONMENT	REE LANE		Title: Name: Address: City-St-Zip:	D PIERSON, R 160 CEDAR CANTONME	
Title: Name: Address: City-St-Zip:	D (GARMAN, IRA P.O. BOX 256 CANTONMENT			Title: Name: Address: City-St-Zip:		() Change() Addition
Title: Name: Address: City-St-Zip:	D (WELTS, LEOL 1029 WOODBU CANTONMENT	JRY PLACE		Title: Name: Address: City-St-Zip:		()Change ()Addition
Title: Name: Address: City-St-Zip:	()) Delete		Title: Name: Address: City-St-Zip:	ASTD PHILLIPS, C 1165 CLYMI CANTONMEI	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: REV. RICHARD A. PHILLIPS PD 04/20/2004