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Apr 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **736079** (5)

1. Corporation Name

GRACE BIBLE CHURCH OF NAPLES, INC.

Principal Place of Business

**6590 GOLDEN GATE PKWY
NAPLES FL 33999**

Mailing Address

**6590 GOLDEN GATE PKWY
NAPLES FL 34105-7342**

3. Date Incorporated or Qualified
06/11/1976

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

4. FEI Number

59-1685912

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BUCKEL, ROBERT
4501 TAMiami TRAIL N.
STE 400
NAPLES FL 33940**

81

Name

LLOYD DOERFLINGER

82

Street Address (P.O. Box Number is Not Acceptable)

257 MONTEREY DRIVE

83

City

NAPLES

84

State

FL

85

Zip Code

34119

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Lloyd Doerflinger

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	SD	☐ DELETE
NAME	RICHARDSON, LARRY	
STREET ADDRESS	4433 18TH PLACE SW	
CITY-ST-ZIP	NAPLES FL	

TITLE	D	☐ DELETE
NAME	BRUNDAGE, DAN	
STREET ADDRESS	2695 66TH STREET SW	
CITY-ST-ZIP	NAPLES FL	

TITLE	TD	☐ DELETE
NAME	RUGANIS, MICHAEL	
STREET ADDRESS	3590 13TH AVENUE SW	
CITY-ST-ZIP	NAPLES FL	

TITLE	D	☒ DELETE
NAME	KANNENSOHN, JEFF	
STREET ADDRESS	525 WHISPERING PINE CT	
CITY-ST-ZIP	NAPLES FL	

TITLE	D	☒ DELETE
NAME	BUCKEL, ROBERT	
STREET ADDRESS	4501 TAMiami TRAIL N. STE 400	
CITY-ST-ZIP	NAPLES FL	

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Lloyd Doerflinger REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # **0069524**

CR2E037 (9/96)