

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 25, 2007 8:00 am**  
**Secretary of State**

01-25-2007 90038 047 \*\*\*\*70.00



**DOCUMENT # 739912**  
 1. Entity Name  
**GRACE UNITED METHODIST CHURCH OF MERRITT ISLAND, INC.**

Principal Place of Business  
**65 NEEDLE BOULEVARD  
 MERRITT ISLAND, FL 32953**

Mailing Address  
**65 NEEDLE BOULEVARD  
 MERRITT ISLAND, FL 32953**

2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country



01172007 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-1154158**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**LAMP, CAROL I  
 65 NEEDLE BOULEVARD  
 MERRITT ISLAND, FL 32953**

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25 Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

T MEDLIN, BOB 918 WESTWOOD DRIVE MERRITT ISLANDS, FL	<input type="checkbox"/> Delete
VD LUSK, JENNY 1130 CARRIGAN BOULEVARD MERRITT ISLAND, FL 32952	<input checked="" type="checkbox"/> Delete
PD BRADEN, BARRY 350 MOCKINGBIRD LN MERRITT ISLAND, FL 32953	<input type="checkbox"/> Delete
ST ZIPPERLY, DEBBIE 600 MILFORD POINT RD MERRITT ISLAND, FL 32952	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VD William Stead 3530 Savannahs Trail Merritt Island, FL 32953	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<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 like empowered.

**SIGNATURE:** Barry Braden **1/21/07 521 867 9134**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #