

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739912

FILED  
Jan 16, 2012  
Secretary of State

**Entity Name:** GRACE UNITED METHODIST CHURCH OF MERRITT ISLAND, INC.

**Current Principal Place of Business:**

65 NEEDLE BOULEVARD  
MERRITT ISLAND, FL 32953

**New Principal Place of Business:**

**Current Mailing Address:**

65 NEEDLE BOULEVARD  
MERRITT ISLAND, FL 32953

**New Mailing Address:**

FEI Number: 59-1154158

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HOFFMANN, BETH A  
640 HEATHER STONE DRIVE  
MERRITT ISLAND, FL 32953 US

**Name and Address of New Registered Agent:**

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:**

Title: T  
Name: SANDERS, PAT A  
Address: 2225 DUMAS STREET  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VD  
Name: HARTLEY, LINDA  
Address: 752 BAYSIDE DRIVE UNIT 501  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: PD  
Name: WILLIAMS, GAIL A  
Address: 4251 TIMOTHY DRIVE  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: ST  
Name: BEATOVICH, GARY  
Address: 3770 SIERRA DRIVE  
City-St-Zip: MERRITT ISLAND, FL 32953

I hereby 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 all other like empowered.

SIGNATURE: BETH A. HOFFMANN

RA

01/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date