


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2006 08:00 AM
Secretary of State

DOCUMENT # 743029		
1. Entity Name GRACE COMMUNITY CHURCH OF ORMOND BEACH, FLORIDA, INC.		
Principal Place of Business 1060 W. GRANADA BLVD. ORMOND BEACH, FL 32174 US	Mailing Address 1060 W. GRANADA BLVD. ORMOND BEACH, FL 32174 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ROBINSON, EVAN 105 BANYAN DRIVE ORMOND BEACH, FL 32176		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing 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
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HOWELL, EARL 52 BROOKWOOD DRIVE ORMOND BEACH, FL 32174	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBINSON, EVAN 105 BANYAN DR. ORMOND BEACH, FL 32176	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP TAYLOR, BRADLEY W 9 SANDY LAKE CIRCLE ORMOND BEACH, FL 32174	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <u>Bradley W. Taylor</u> Bradley W. Taylor		010806 386 673 2404
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>



01052006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-1905936	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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01/12/06-80026-015 61.25