## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #743629**

1. Entity Name GREATER GRACE APOSTOLIC CHURCH INCORPORATED



FILED Apr 27, 2007 08:00 All Secretary of State

Principal Place of Business

2102 E. COLUMBUS DRIVE TAMPA, FL 33605 US Mailing Address 695 10THJ AVE N

SAFETY HARBOR, FL 34695

US



DO NOT WRITE IN THIS SPACE

04242007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 06-1646901 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BAKER, SARAH 695 10TH AVE N SAFETY HARBOR, FL 34695 DO NOT WRITE IN THIS SPACE

<ul> <li>The above named entity submits this statement for the purpose of chathe obligations of registered agent.</li> </ul>	nging its registered office or registered agent, or both, in	ina State of Florida. I am familiar with, and accept
SIGNATURE	(NOTE Descripted Apost construction with the resistance)	DATE

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

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

OFFICERS AND DIRECTORS 10. TITLE PDT NAME BAKER, SARAH STREET ADDRESS 695 10TH AVE N CITY-ST-ZIP SAFETY HARBOR, FL 34695 TITLE NAME **OUIRONA, TRACY** STREET ADDRESS 2102 E COLOMBUS DRIVE TAMPA, FL 33605 CITY-ST-ZIP TITLE TMD NAME **EVANS, MICHELL** STREET ADDRESS 2719 N 46TH ST CITY-ST-70 TAMPA, FL 33605 TITLE NAME WALKER, SHARRON STREET ADDRESS 2102 E COLUMBUS DR CITY-ST-7P TAMPA, FL 33605 TITLE NAME EVANS, JUILA STREET ADDRESS 2719 N 46TH ST CITY-ST-70P TAMPA, FL 33605 TITLE KITCHEN, KEVIN STREET ADDRESS | 5639 18TH WAY S CITY-ST-ZE SAINT PETERSBURG, FL 33712

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I turther 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 a required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE: S

SIGNATURE AND TYPED ON PRINTED HAVE CHARGED FIFTEER ON DIRECTOR

4-24-07

Daytime Phone #