

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 0-15-96

B-1183-C

DOCUMENT # 746122 (1)

1. Corporation Name

GRACE BIBLE CHURCH OF DELAND, FLORIDA, INC.



Principal Place of Business

Mailing Address

972 GLENWOOD ROAD
DELAND FL 32720-0240

9 POINSETTIA DR
972 GLENWOOD ROAD
DELAND FL 32720-0240
32724

3. Date Incorporated or Qualified
03/02/1979

3a. Date of Last Report
05/11/1995

21. Principal Place of Business
Casselberry Women's Club

2a. Mailing Address
9 Poinsettia Dr.

4. FEI Number
59-2301516

Applied For
Not Applicable

22. Suite, Apt. #, etc.
251 Overbrook Dr.

27. Suite, Apt. #, etc.

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

23. City & State
Casselberry FL

28. City & State
Deland FL

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

24. Zip Country
32724 SEMINOLE

29. Zip Country
32724 FLORIDA

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

KENYON, ROBERT
9 POINSETTE DRIVE
DELAND FL 32720

81. Name

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

83.

84. City

FL

85. Zip Code

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: Robert Kenyon Robert Kenyon President - 2/8/96

Signature typed or printed name of registered agent and filer's application

(If filer is Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME KENYON, ROBERT
STREET ADDRESS 9 POINSETTA DRIVE
CITY-ST-ZIP DELAND FL ☐ DELETE

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

TITLE VD
NAME SMITH, ARNOLD
STREET ADDRESS 164 DOVER LANE
CITY-ST-ZIP DELAND FL ☒ DELETE

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

TITLE TD
NAME EDWARDS, ELAYNE
STREET ADDRESS 270 SANDYHOOK LANE
CITY-ST-ZIP DELAND FL ☐ DELETE

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

TITLE VSD
NAME DeWitt H. Huntington
STREET ADDRESS 784 Windwillow Circle
CITY-ST-ZIP Winter Springs FL 32708 ☐ DELETE

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Robert Kenyon Robert Kenyon 2/8/96 904 734-3159

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)