

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748825

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** GRACE BAPTIST CHURCH OF LAKE WALES, INC.

**Current Principal Place of Business:**

3530 NORTH SCENIC HIGHWAY  
LAKE WALES, FL 33898

**New Principal Place of Business:**

**Current Mailing Address:**

3530 NORTH SCENIC HIGHWAY  
LAKE WALES, FL 33898

**New Mailing Address:**

**FEI Number:** 59-2966602

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLAFORD, CECIL F  
53 EAST STARR AVE  
LAKE WALES, FL 33898 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:** VDS  
**Name:** WILLAFORD, CECIL  
**Address:** 53 E STARR AVE  
**City-St-Zip:** LAKE WALES, FL 33898

**Title:** DT  
**Name:** COPE, RONALD  
**Address:** 415 AVENUE K N.E.  
**City-St-Zip:** WINTER HAVEN, FL 33881

**Title:** P  
**Name:** QUINN, SAMUEL PASTOR  
**Address:** 3530 N. SCENIC HWY  
**City-St-Zip:** LAKE WALES, FL 33898

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:** SAMUEL QUINN

P

01/06/2011

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

\_\_\_\_\_  
Date