

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 20, 2007 8:00 am
Secretary of State

03-20-2007 90014 014 ****61.25

DOCUMENT # 751417

1. Entity Name

GRACE BAPTIST CHURCH OF BROWARD COUNTY,
FLORIDA, INC.



Principal Place of Business

1811 S.W. 95TH TERRACE
HOLLYWOOD FL 33025
US

Mailing Address

P O BOX 4030
HIALEAH FL 33014
US

2. Principal Place of Business - No P.O. Box #
19200 Griffin Road

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Southwest Ranches, Fl

City & State

4. FEI Number

59-2324843

Applied For

Not Applicable

Zip
33332

Country
U.S.

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SWEAT, JOSEPH
5451 WEST 11TH AVENUE
HIALEAH FL 33012

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME SWEAT, JOSEPH
STREET ADDRESS 5451 WEST 11TH AVENUE
CITY-ST-ZIP HIALEAH FL 33012

TITLE TSD ☐ Delete
NAME LAURENCE, SANDRA L
STREET ADDRESS 341 NORTH 69TH WAY
CITY-ST-ZIP HOLLYWOOD FL 33024

TITLE D ☐ Delete
NAME BROWN, TONY
STREET ADDRESS 3601 ACAPULCO DRIVE
CITY-ST-ZIP MIRAMAR FL 33024

TITLE D ☐ Delete
NAME LAURANCE, ALEXANDER
STREET ADDRESS 341 NORTH 69TH WAY
CITY-ST-ZIP HOLLYWOOD FL 33024

TITLE VD ☐ Delete
NAME ALDERMAN, DENNIS
STREET ADDRESS 1594 NW 183RD AVENUE
CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 Section 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: *Joseph Sweat* **Joseph SWEAT** **3-7-2007** **305-821-5281**