

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751417

FILED
Mar 31, 2009
Secretary of State

Entity Name: GRACE BAPTIST CHURCH OF BROWARD COUNTY, FLORIDA, INC.

Current Principal Place of Business:

19200 GRIFFIN ROAD
SOUTHWEST RANCHES, FL 33332 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 4030
HIALEAH, FL 33014 US

New Mailing Address:

FEI Number: 59-2324843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWEAT, JOSEPH
5451 WEST 11TH AVENUE
HIALEAH, FL 33012 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: PD () Delete
Name: SWEAT, JOSEPH
Address: 5451 WEST 11TH AVENUE
City-St-Zip: HIALEAH, FL 33012

Title: TSD () Delete
Name: LAURENCE, SANDRA L
Address: 341 NORTH 69TH WAY
City-St-Zip: HOLLYWOOD, FL 33024

Title: D () Delete
Name: BROWN, TONY
Address: 3601 ACAPULCO DRIVE
City-St-Zip: MIRAMAR, FL 33024

Title: D () Delete
Name: LAURANCE, ALEXANDER
Address: 341 NORTH 69TH WAY
City-St-Zip: HOLLYWOOD, FL 33024

Title: VD () Delete
Name: ALDERMAN, DENNIS
Address: 1594 NW 183RD AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TSD (X) Change () Addition
Name: LAURANCE, SANDRA L
Address: 341 NORTH 69TH WAY
City-St-Zip: HOLLYWOOD, FL 33024

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: MILNER, RONALD
Address: 10656 NW 7TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOSEPH SWEAT

P/D

03/31/2009

Electronic Signature of Signing Officer or Director

Date