

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90244 049 ****70.00

DOCUMENT # 752024

1. Entity Name

GRACE NEW COVENANT MINISTRIES, INC.



Principal Place of Business

3101 S. KINGSWAY RD.
SEFFNER FL 33584
US

Mailing Address

PO BOX 635
SEFFNER FL 33583
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

CRUZ, VICTOR REV
6407 FIVE ACRE RD.
PLANT CITY FL 33565

7. Name and Address of New Registered Agent

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, 2004

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 PT
NAME GONZALEZ, ELVIN REV ☐ Delete
STREET ADDRESS 2103 LUMSDEN RD.
CITY-ST-ZIP VALRICO FL 33594

TITLE VPT
NAME CRUZ, VICTOR REV. ☐ Delete
STREET ADDRESS 6407 FIVE ACRE RD.
CITY-ST-ZIP PLANT CITY FL 33565

TITLE SD ☒ Delete
NAME AGUILA, AIDA
STREET ADDRESS 1801 CITRUS ORCHARD
CITY-ST-ZIP VALRICO FL 33594

TITLE DT ☐ Delete
NAME GONZALEZ, REBECCA
STREET ADDRESS 724 KENSINGTON LAKE CIRCLE
CITY-ST-ZIP BRANDON FL 33511

TITLE D ☐ Delete
NAME VALLADARES, MICAH
STREET ADDRESS 5302 WILLIAMS RD.
CITY-ST-ZIP TAMPA FL 33610

TITLE D ☒ Delete
NAME GUZMAN, YOLANDA
STREET ADDRESS 841 GREENBELT CIR
CITY-ST-ZIP BRANDON FL 33510

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME 601 HERITAGE PARK Ct.
STREET ADDRESS Valrico Fl. 33594
CITY-ST-ZIP

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

TITLE ☐ Change ☒ Addition
NAME Richard Valentin
STREET ADDRESS 1232 Askew Dr.
CITY-ST-ZIP Brandon Fl. 33511

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

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

TITLE ☐ Change ☒ Addition
NAME Rafael Morales
STREET ADDRESS 10102 Timmons Rd.
CITY-ST-ZIP Thonotosassa Fl. 33592

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Rafael Morales President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/04

Date

(813) 684-2754

Daytime Phone #