

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 19, 2008 8:00 am
Secretary of State

02-19-2008 90024 023 ****61.25

DOCUMENT # 752058

1. Entity Name

GRACE BIBLE CHURCH OF HOMOSASSA SPRINGS, INC.



Principal Place of Business

6382 WEST GREEN ACRES STREET
HOMOSASSA FL 34446

Mailing Address

P.O. BOX 1067
HOMOSASSA SPRINGS FL 34447-1067



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-1996100

Applied For

Not Applicable

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

KAREIS, WENCE
98 W. BYRSONIMA LOOP
HOMOSASSA FL 34446

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 reappointing)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE CD ☐ Delete
NAME WALKER, JEFF
STREET ADDRESS 4462 S SKYLARK TERR
CITY- ST- ZIP HOMOSASSA FL 34446

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

TITLE D ☐ Delete
NAME MAUGHAN, NELSON
STREET ADDRESS 44 CYPRESS BLVD
CITY- ST- ZIP HOMOSASSA FL 34446

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

TITLE D ☐ Delete
NAME SANDERS, JIM
STREET ADDRESS 137 DOUGLAS ST
CITY- ST- ZIP HOMOSASSA FL 34446

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

TITLE T ☐ Delete
NAME KAREIS, WENCE
STREET ADDRESS 98 W. BYRSONIMA LOOP
CITY- ST- ZIP HOMOSASSA FL 34446

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

TITLE D ☒ Delete
NAME COCKING, JACK
STREET ADDRESS PO BOX 448
CITY- ST- ZIP HOMOSASSA FL 34446

TITLE ☐ Change ☒ Addition
NAME *MR. Al Arden*
STREET ADDRESS *8080 W. COCONUT PALM DR.*
CITY- ST- ZIP *HOMOSASSA, FL. 34448*

TITLE VCD ☒ Delete
NAME BUSH, LEONARD L JR
STREET ADDRESS 17 VINCA ST
CITY- ST- ZIP HOMOSASSA FL 34446

TITLE ☐ Change ☒ Addition
NAME *MR. Joe Price*
STREET ADDRESS *965 S. SITTING ROCK POINT*
CITY- ST- ZIP *HOMOSASSA, FL 34448*

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: *Wence Kareis* *WENCE S. KAREIS 2/3/08* *352-628-8631*