FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 755227

1. Corporation Name

GRACE BAPTIST CHURCH OF CLEARWATER, INC.

Principal Place of Business 2787 SUNSET POINT ROAD

CLEARWATER FL 34619

Mailing Address

2787 SUNSET POINT ROAD CLEARWATER FL 34619

FILED Feb 23, 1999 8:00 am § Secretary of State

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Principal Place of Business A			3. Date Incorporated or Qualifed					
21 2787 Sunset Point Road 26			11/21/1980	1 1.				
Suite, Apt. #, etc. Suite, Apt. #, etc.			4. FEI Number	 '''	lied For			
22		27		59-1847593		Applicable		
City & State City & State			5. Certificate of Status Desired	\$8.75 Ac Fee Req				
		Country	6. Election Campaign Financing	\$5.00 N	vlay Be			
24 33759 25 Pinellas 29 30			Trust Fund Contribution	Added to	Fees			
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent								
			81 Name	kowski Kenneth E				
YUSKO, REV JOHN			82 Street A	Address (P.O. Box Number is Not Acceptable)				
1505 LAKE WAY			291	71 Estancia Blvd. F	<u>419</u>			
			83					
CLEARWATER FL 34616			04 015		95 Zin C	ode		
			84 City C	learwater FL	85 Zip C 33			
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objigations of Section 617.0503, Florida Statutes.								
office or n	egistered agent, or both, in the State on familiar with, and accept the obligat	or Honda, Such change was auth ions of Bection 617.0503, Florida	onzed by the corpo s Statutes.	ration a board of directors. Thereby accept the appoint	ciii as ieg			
	Kenneth Jone	wale Kenneth		1/14/9	9			
SIGNATURE	Signature, typed or printed name of registered agen		gistered Agent signature re					
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AN				
TITLE	D	DELETE	1.1 TITLE	a	2 Change	Addition		
NAME	YUSKO, REV JOHN		1.2 NAME	JANKOWSKI, Rev. Kenneth				
STREET ADDRESS	1505 LAKE WAY		1.3 STREET ADDRESS	2971 Estancia BLVD #419				
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY-ST-ZIP	Clearwater, FL 33761				
TITLE	VD	☐ DELETE	2.1 TITLE	20	☑ Change	☐ Addition		
NAME	BROWER,PAUL		2.2 NAME	Wilky, Ivon 110 Irwin ST.				
STREET ADDRESS	1963 ELLIOTT DR.		2.3 STREET ADDRESS					
CITY-ST-ZIP	CLEARWATER FL		2.4 CITY-ST-ZIP	SAFETY HARBOR, FL 34695				
TITLE	STD	DELETE	3.1 TITLE	T	Change	☐ Addition		
NAME	MAGILLIGAN, KAREN		3.2 NAME	McCue, Eleanor vea	in ant	F,-2		
STREET ADDRESS			3.3 STREET ADDRESS	McCue, Eleanor Jea 2427 Finlandia Lune	. MPI	30		
CITY-ST-ZIP	CLEARWATER FL		3.4. CITY-ST-ZIP	Clearwater, Fl. 33.	763			
TITLE	View wiff it left I be	☐ DELETE	4.1 TITLE	,	Change	Addition		
NAME			4.2 NAME			İ		
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 CITY-ST-ZiP					
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition		
NAME			5.2 NAME	•				
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP			,		
TITLE		☐ DELETE	6.1 TITLE		Change	Addition		
NAME			6.2 NAME					
			6.3 STREET ADDRESS					
STREET ADDRESS			6.4 CITY-ST-ZIP					
CITY-ST-ZIP	}		V.+ OD 1-01-21F (

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETTS

KENNETS JANGUET JANGUET SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

14/99

727-791-7797 Daytime Phone # <2E03/ (11/98)