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Apr 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **755337** **(3)**

1. Corporation Name

SEBRING GRACE BRETHREN CHURCH, INC.

Principal Place of Business	Mailing Address
3626 THUNDERBIRD ROAD SEBRING FL 33872	3626 THUNDERBIRD ROAD SEBRING FL 33872

3. Date Incorporated or Qualified: 12/02/1980

4. FEI Number: 59-2229674 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21) / 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) / Suite, Apt. #, etc. (27)

City & State (23) / City & State (28)

Zip (24) Country (25) / Zip (29) Country (30)

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HOBBS, BRIAN
107 KAROLA DRIVE
SEBRING FL 33870

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Brian Hobbs 4/17/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	OGDEN, DAVID		1.2 NAME		
STREET ADDRESS	209 IBIS AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL 33872		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ANDERSON, WENDELL D		2.2 NAME		
STREET ADDRESS	15 NORTE DAME ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE PLACID FL		2.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	HOBBS, BRIAN		3.2 NAME		
STREET ADDRESS	107 KAROLA DRIVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL 33870		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	GOOD, MARVIN		4.2 NAME		
STREET ADDRESS	2402 HIDDEN CREEK CIR		4.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL		4.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	METZGER, PAMELA SUE		5.2 NAME		
STREET ADDRESS	3919 VIOLET AVE.		5.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	TAYLOR, JOE		6.2 NAME		
STREET ADDRESS	2412 HIDDEN CREEK CIR		6.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL 33870		6.4 CITY-ST-ZIP		

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.

SIGNATURE: Brian Hobbs (CHRIS-D) 4/17/98 (941)385-0838

CR2E037 (10/97)