


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2004 8:00 am
Secretary of State

07-14-2004 90006 008 ****61.25

DOCUMENT # 755337					
1. Entity Name SEBRING GRACE BRETHERN CHURCH, INC.					
Principal Place of Business 3626 THUNDERBIRD ROAD SEBRING, FL 33872			Mailing Address PO BOX 3476 SEBRING, FL 33871-3476		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2229674	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
RITENOUR, DEWAYNE 1112 SUNSET DR. SEBRING, FL 33870			Name <u>Anderson, Wendell D</u> Street Address (P.O. Box Number is Not Acceptable) <u>15 Notre Dame St</u> City <u>Lake Placid</u> FL Zip Code <u>33852</u>		
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 <u>WENDELL D. ANDERSON</u> <u>W.D. Anderson Jr</u> DATE <u>7/11/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	OGDEN, DAVID		NAME	Smith, Dr Randall	
STREET ADDRESS	209 IBIS AVE		STREET ADDRESS	1033 5th Ave	
CITY-ST-ZIP	SEBRING, FL 33872		CITY-ST-ZIP	Sebring, FL 33875	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANDERSON, WENDELL D		NAME	Brown, Dennis	
STREET ADDRESS	15 NOTRE DAME ST		STREET ADDRESS	725 Lin Road	
CITY-ST-ZIP	LAKE PLACID, FL		CITY-ST-ZIP	Sebring, FL 33876	
TITLE	DT	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RITENOUR, DEWAYNE		NAME	Lohnes Vincent	
STREET ADDRESS	1112 SUNSET DR.		STREET ADDRESS	4110 Somalia St	
CITY-ST-ZIP	SEBRING, FL 33870		CITY-ST-ZIP	Sebring, FL 33875	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ESHELMAN, KIRK		NAME		
STREET ADDRESS	336 PELICAN AVE.		STREET ADDRESS		
CITY-ST-ZIP	SEBRING, FL 33872		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FITCH, EDWIN		NAME		
STREET ADDRESS	839 GARLAND AVE.		STREET ADDRESS		
CITY-ST-ZIP	SEBRING, FL 33872		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ESHELMAN, ILENE		NAME		
STREET ADDRESS	336 PELICAN AVE		STREET ADDRESS		
CITY-ST-ZIP	SEBRING, FL 33872		CITY-ST-ZIP		
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: <u>WENDELL D. ANDERSON</u> <u>W.D. Anderson Jr</u> DATE <u>7/11/04</u> 863-665-3155 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

44048543



07062004 Chg-NP CR2E037 (10/03)

Applied For
Not Applicable

8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RITENOUR, DEWAYNE
1112 SUNSET DR.
SEBRING, FL 33870

Name Anderson, Wendell D
 Street Address (P.O. Box Number is Not Acceptable)
15 Notre Dame St
 City Lake Placid **FL** Zip Code 33852

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Due by September 8, 2004

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CITY-ST-ZIP	Sebring, FL 33875	
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR