

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759492

FILED
Feb 23, 2009
Secretary of State

Entity Name: GRACE BAPTIST CHURCH OF GAINESVILLE, INC.

Current Principal Place of Business:

7100 NW 39TH AVE
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

7100 NW 39TH AVE
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-2140506 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TOWNSEND, BILL
12317 NW MILLHOPPER RD
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ADAMSON, JAY,
Address: 12020 SW 8TH AVENUE
City-St-Zip: GAINESVILLE, FL

Title: D () Delete
Name: MORRIS, CARLTON
Address: 4913 NE 77 AVE
City-St-Zip: GAINESVILLE, FL 32609

Title: T () Delete
Name: TOWNSEND, BILL
Address: 12317 N.W. MILLHOPPER RD.
City-St-Zip: GAINESVILLE, FL

Title: C () Delete
Name: FEMRMAN, HARRY
Address: 4826 NW 34TH DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: C () Delete
Name: FEMRMAN, HARRY
Address: 4826 NW 34TH DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: SANDERS, DAVID
Address: 2404 NW 46TH TERRACE
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: VINCENT, BETTY SUE
Address: 5730 NW 67 CT
City-St-Zip: GAINESVILLE, FL 32653

Title: C (X) Change () Addition
Name: FEHRMAN, HARRY
Address: 4826 NW 34TH DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BILL TOWNSEND

T

02/23/2009

Electronic Signature of Signing Officer or Director

Date