2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2009
Secretary of State

DOCUMENT# 761590

Entity Name: GRACE BAPTIST CHURCH OF LABELLE, INC.

Current Principal Place of Business:

4200 EUCALYPTUS BLVD. NE
P O BOX 1004
LABELLE, FL 33935 US

New Principal Place of Business:

4200 EUCALYPTUS BLVD. NE
LABELLE, FL 33935 US

Current Mailing Address:

P.O. BOX 1004
P O BOX 1004
LABELLE, FL 33975 US

New Mailing Address:

FEI Number: 59-2469226 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEVISME, TOM
270 EVANS RD
LABELLE, FL 33935 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: MR ( ) Delete
Name: NOBLES, KENNY
Address: 745 B
City-St-Zip: LABELLE, FL 33937 US

Title: MR ( ) Delete
Name: DEVISME, TOM
Address: 270 EVANS RD
City-St-Zip: LABELLE, FL 33935 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change ( ) Addition
Name: DEVISME, TOM
Address: 270 EVANS RD
City-St-Zip: LABELLE, FL 33937 US

Title: MR (X) Change ( ) Addition
Name: DEVISME, MATTHEW
Address: 5032 SE TRADEWIND CIR
City-St-Zip: LABELLE, FL 33935 US

Title: MR ( ) Change (X) Addition
Name: ROLLE, JASON
Address: 4036 E SUNFLOWER CIR
City-St-Zip: LABELLE, FL 33935

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: THOMAS DEVISME MR 04/05/2009

Electronic Signature of Signing Officer or Director — Date