

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90027 033 ****61.25

DOCUMENT # 762392

1. Entity Name

GRACE COMMUNITY CHURCH OF THE CHRISTIAN AND MISS

Principal Place of Business

Mailing Address

1446-C SW 25TH AVENUE
 BOYNTON BEACH FL 33426
 US

1446-C SW 25TH AVENUE
 BOYNTON BEACH FL 33426-7479
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0910355

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROWN, GREGORY A REV
1446-C SW 25 AVE
BOYNTON BEACH FL 33426

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME **PPD BROWN, GREGORY A REV**
 STREET ADDRESS **1446-C S.W. 25TH AVENUE**
 CITY-ST-ZIP **BOYNTON BEACH FL 33426**

TITLE Change Addition
 NAME **PPD SHORE, BRIAN REV.**
 STREET ADDRESS **4563 CONCORDIA LANE**
 CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE Delete
 NAME **TD COLTER, ELIZABETH**
 STREET ADDRESS **1706-NE 2ND AVE**
 CITY-ST-ZIP **DELRAY BCH FL 33444**

TITLE Change Addition
 NAME **TDS BROWN, GREGORY A. REV.**
 STREET ADDRESS **1446-C SW 25TH AVE**
 CITY-ST-ZIP **BOYNTON BEACH FL 33426**

TITLE Delete
 NAME **D LAYZEUX, PIERRE**
 STREET ADDRESS **3619 LAKEVIEW BLVD**
 CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE Change Addition
 NAME **D O'FARROW, TRUDY**
 STREET ADDRESS **6268 WINDLASS CIRCLE**
 CITY-ST-ZIP **BOYNTON BEACH FL 33437**

TITLE Delete
 NAME **D BROWN, ROBERT**
 STREET ADDRESS **1782 BANYAN CREEK CIRCLE N.**
 CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE Change Addition

TITLE Delete
 NAME **D SENIKOFF, EDITH**
 STREET ADDRESS **4588 FRANCES DRIVE**
 CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE Change Addition

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition

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: *Richard A. B...* **REQUIRED**

5-23-2000

561-738-9642

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR 2E037 (9/99)