

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 11, 2008 08:00 A
Secretary of State

DOCUMENT # 766438	
1. Entity Name GRACE BAPTIST CHURCH OF PONCE DE LEON, INC.	

Principal Place of Business 1474 AMMONS PONCE DE LEON FL 32455	Mailing Address 1474 AMMONS RD 10079 STATE HWY 834 PONCE DE LEON FL 32455
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/07)

4. FEI Number 59-2902209		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent KINKEY, ARTHUR JR 10079 STATE HWY 834 DEFUNIAK SPRINGS FL 32433		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____
Signature, typed or printed name of registered agent and not acceptable. (NOTE: Registered Agent signature is not used when resigning) DATE _____

FILE NOW: FEE IS \$61.25 Due By: May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to: Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D O'STEEN, RANDY 2816 OLD MILL RD PONCE DE LEON FL 32455 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition U00000854501 03/27/08-80011-005 61.25
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD HOWARD, HARVEY 2253 N HWY 181 WESTVILLE FL 32464 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D KINKEY, CHARLES 53 SULLIVAN STREET DEFUNIAK SPRINGS FL 32433 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	ST KINKEY, ARTHUR C., JR. 10079 STATE HWY. 83 DEFUNIAK SPRGS. FL ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VD DAVIS, PAUL 2277 N HIGHWAY 181 WEST VILLE FL 32464 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D HENDERSON, JOE 1867 OLD MT ZION RD PONCE DE LEON FL 32455 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Arthur C. Kinkey Jr.* **ARTHUR C. KINKEY JR** **8 MAR 08** **850-858-2251**