## **2001 UNIFORM BUSINESS REPORT (UBR) FILED** Apr 27, 2001 08:00 AM N00000007612 DOCUMENT # 1. Entity Name **Secretary of State** GRACE COMMUNITY CHURCH OF SARASOTA, INC. Principal Place of Business Mailing Address 7320 LOBLOLLY BAY TRAIL 7320 LOBLOLLY BAY TRAIL BRANDENTON FL BRANDENTON FL 34202 34202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For X Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BRITT JAMES RJR Street Address (P.O. Box Number is Not Acceptable) 7320 LOBLOLLY BAY TRAIL BRANDENTON FL34202 City 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. 04/27/2001 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to **\$5.00** May Be FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE D ☐ Delete TITLE ☐ Change ☐ Addition NAME JONES DANIEL. D NAME STREET ADDRESS STREET ADDRESS 4145 TALL TREE DR. CITY-ST-ZIP CITY-ST-ZIP ORLANDO 32810 TITLE ☐ Delete TITLE X Change ☐ Addition NAME PROFFITT WILLIAM NAME PROFFITT WILLIAM STREET ADDRESS STREET ADDRESS 7324 LOBLOLLY BAY TRAIL 7324 LOBLOLLY BAY TRAIL CITY-ST-ZIP BRANDENTON FL. 34202 CITY-ST-ZIE BRANDENTON FL. 34202 TITLE Delete TITLE X Change ☐ Addition NAME BRITT JAMES R.IR NAME BRITT JAMES R.IR STREET ADDRESS STREET ADDRESS 7320 LOBLOLLY BAY TRAIL 7320 LOBLOLLY BAY TRAIL CITY-ST-ZIP BRANDENTON CITY-ST-ZIP BRANDENTON FL. 34202 FT. 34202 TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME

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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE: JAMES R. BRITT, JR. 2 2 2

□ Delete

D

04/27/2001

Change

Addition

CR2E037 (11/00)