

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90191 020 ****70.00

DOCUMENT # N00590

1. Entity Name

GRACE BAPTIST CHURCH OF MONTVERDE, INC.



Principal Place of Business

16124 COUNTY RD 455
MONTVERDE FL 34756
US

Mailing Address

PO BOX 560358
MONTVERDE FL 34756
US



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2427236

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DEXTER, RICHARD
310 WILLARD AVE
FRUITLAND PARK FL 34731

7. Name and Address of New Registered Agent

Name Richard Dexter

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

15935 Sausalito Cir

City Clermont

FL

Zip Code
34711

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

Richard Dexter

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

(NOTE: Registered Agent signature required when re-registering)

DATE

4/26/06

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PT ☐ Delete
NAME DEXTER, RICHARD
STREET ADDRESS 310 WILLARD AVE
CITY-ST-ZIP FRUITLAND PARK FL 34731

TITLE TT ☐ Delete
NAME HURLEY, CHARLES B
STREET ADDRESS 17115 FRANKLIN
CITY-ST-ZIP MONTVERDE FL 34756

TITLE T ☐ Delete
NAME LUSH, JAMES
STREET ADDRESS 16629 MORNINGSID DR
CITY-ST-ZIP MONTVERDE FL 34756

TITLE S ☐ Delete
NAME CUMBO, PAULA
STREET ADDRESS 17305 PALM CIRCLE
CITY-ST-ZIP MONTVERDE FL 34756

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Richard Dexter

4/26/06

352-250-4691