

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00590

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** GRACE BAPTIST CHURCH OF MONTVERDE, INC.

**Current Principal Place of Business:**

16124 COUNTY RD 455  
MONTVERDE, FL 34756 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 560358  
MONTVERDE, FL 34756 US

**New Mailing Address:**

**FEI Number:** 59-2427236

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DEXTER, RICHARD  
15935 SUASNLITO CIRCLE  
CLERMONT, FL 34711 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: PT  
Name: DEXTER, RICHARD  
Address: 15935 SUASALITO CIRCLE  
City-St-Zip: CLERMONT, FL 34711

Title: TT  
Name: LUSH, JAMES  
Address: 17115 FRANKLIN  
City-St-Zip: MONTVERDE, FL 34756

Title: T  
Name: HENDY, CHERYL  
Address: 15034 VINOLA PL  
City-St-Zip: MONTVERDE, FL 34756

Title: S/T  
Name: DEXTER, HEATHER  
Address: 15935 SAUSALITO CIR  
City-St-Zip: CLERMONT, FL 34711

Title: T  
Name: KING, JOHN  
Address: 17349 ORANGE COURT  
City-St-Zip: MONTVERDE, FL 34756

I hereby 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 all other like empowered.

SIGNATURE: RICHARD DEXTER

PT

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date