

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002100

FILED
Feb 16, 2007
Secretary of State

Entity Name: GRACE BAPTIST CHURCH OF TITUSVILLE, INC.

Current Principal Place of Business:

1215 NORWOOD AVE.
TITUSVILLE, FL 327962751

New Principal Place of Business:

Current Mailing Address:

1215 NORWOOD AVE.
TITUSVILLE, FL 327962751

New Mailing Address:

FEI Number: 59-3712700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, LAWRENCE S
1215 NORWOOD AVE.
TITUSVILLE, FL 327962751 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: DP () Delete
Name: THOMPSON, LAWRENCE S
Address: 950 CYPRESS COURT
City-St-Zip: TITUSVILLE, FL 32780

Title: DST () Delete
Name: THOMPSON, MARJORIE C
Address: 950 CYPRESS COURT
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: SMITH, DOUGLAS B
Address: 969 FAY BLVD
City-St-Zip: COCOA, FL 32927

Title: D () Delete
Name: HALL, STAFFORD A
Address: 3856 GOLDEN MEADOW COURT
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMPSON, LAWRENCE S.

DP

02/16/2007

Electronic Signature of Signing Officer or Director

Date