## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Mailing Address

PO BOX 1779

JUPITER, FL 33468-1779

3. Mailing Address

Suite, Apt. #, etc.

City & State
Jupiter, FL

1779

Country A

**DOCUMENT # N02000001407** 

Principal Place of Business

PALM BCH GARDENS, FL 33410

2. Principal Place of Business
758 BOCCE\_Court

Palm Beach Gardens,

8021 EDGEMERE LN

Suite, Apt. #, etc.

1. Entity Name LOVE AND GRACE FELLOWSHIP OF JUPITER, INC.

Apr 07, 2004 8:00 am Secretary of State 04-07-2004 90052 010 \*\*\*\*70.00 54028241 04052004 Chg-NP CR2E037 (10/03) 4. FEI Number 03-0453729 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
ELLIOTT IV, EDWARD L 8021 EDGEMERE LN				Name Elliott IV. Edward L			
				Street Address (P.O. Box Number is Not Acceptable)			
	GARDENS, FL 33410	·		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
758 Bocce Court							
			Bala	Beach barden	2	FL ZipCode	HID
8: The above	named entity submits this state fient for the purpo	ose of changing its regist				am familiar with a	nd accept
the obligations of egist reg agent							
	56/19/				_	111-1.16	(
SIGNATURE	/ / LCC(0)					415/04	
Signature, typed or printed name of registered agent and (tile if applicable. (NOTE: Registered Agent signature required when reinstaing)  DATE /							
	Filing Fee is \$61.25 9. Election Campa Due by May 1, 2004 Trust Fund Con						ite
10.	OFFICERS AND DIRECTORS	1	1.	ADDITIONS/CHANGI	ES TO OFFICERS AN	D DIRECTORS IN	10
TITLE	ם	☐ Defete □	ITLE	Director		Change	Addition
NAME	ELLIOTT IV, EDWARD L	1	AME	Elliott IV, Edward L.			. [
STREET ADDRESS	8021 EDGEMERE LN	s	TREET ADDRESS	758 Bocce Court			
CITY-ST-ZIP	PALM BCH GARDENS, FL 33410	410 CI		Palm Beach Gardens, FL 33410			
THILE	D	☐ Detete TI	ITLE	<b>N</b>		Change	Addition
NAME	ELLIOTT, LAURIE M	. N	AME	Elliot, Laurie	<i>m</i> .		.
STREET ADDRESS	8021 EDGEMERE LN	s	TREET ADDRESS	MER CARE COL	リドT		· · · ·
CITY-ST-ZIP	PALM BCH GARDENS, FL 33410	С	ITY-ST-ZIP	Palm Beach	Gardens, Fl	33410	
TITLE	D	☐ Delete T	ITLE	D .		Change	Addition
NAME	SPEEGLE, ALLEN		AME	Specale, Allen		7	]
STREET ADDRESS	420 VINCENT DR	s	TREET ADDRESS	638 George	Court		1
CITY-ST-ZIP	MOUNT DORA, FL 32757	C	ITY-ST-ZIP	mount Dor	a, FL 3	2757	1
TITLE	D	☐ Delete 11	ITLE	Α	<del></del>	Change	Addition
NAME	FOWLER, WILLIAM		JAME 3MAI	Fowler, Willi	am	7	_
STREET ADDRESS	4200 N OCEAN DR, #1605-2	s	TREET ADDRESS	6313 Wakel	norst Kď		-
CITY-ST-ZIP	SINGER ISLAND, FL 33404	- C	TY-ST-ZIP	Charlotte, N	C 28220	<i>b</i>	
TITLE	٥	☐ Delete □	ITLE	D	^	Change	Addition
NAME	MITCHELL, JERRY R	N	IAME	Mitchell, Jer	ry R	/	ĺ
STREET ADDRESS:	8010 EDGEMERE LN		TREET ADDRESS:	=724_Cable	Beach-Lai	ne	المد عندين
CITY-ST-ZIP	PALM BCH GARDENS, FL 33410	c	TY-ST-ZIP	Pain Beach	bardens,	CL 33410	
TITLE		☐ Delete T	ITLE			☐ Change	Addition
NAME			AME				İ
STREET ADDRESS			TREET ADDRESS				ļ
CITY-ST-ZIP			ITY-ST-ZIP				
indicated of the co	certify that the information supplied with this filing if on this report or supplemental report is true and reportation or the receiver or trustee empowered to or or an attachment with an address, with all oth true.	accurate and that my sign execute this report as rec	nature shall h	ave the same legal effect as i	f made under oath; th	nat I am an officer o	r director
	SIGNATURE AND TYPED OR PRINTED NAM	IÉ OF SIGNING OFFICER OR DIRI	ECTOR	\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Date	Daytime Phone #	
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