## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000002120

FILED Mar 31, 2006 Secretary of State

Entity Name: GRACE COMMUNITY CHURCH OF MOSSY HEAD, FL., INC.

urrent P	rincipal Place	of Business:	New Principal Place	ce of Business:
287 LAIRI RESTVIE	D ROAD EW, FL 32539	US		
urrent M	lailing Address	<b>:</b> :	New Mailing Addr	ess:
287 LAIRI RESTVIE	D ROAD EW, FL 32539	US		
El Number:	: 04-3660985	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	Address of Cu	urrent Registered Agent:	Name and Address	s of New Registered Agent:
OUFFEY, <sup>1</sup> 431 LAIRI CRESTVIE		US		
	named entity so of Florida.	ubmits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,
the State	e of Florida. RE:			ered office or registered agent, or both,
the State	e of Florida. RE:	ubmits this statement for the p c Signature of Registered Age		ered office or registered agent, or both,  Date
the State	e of Florida. RE:	c Signature of Registered Age	ent	
the State	e of Florida.  RE: Electronic  S AND DIRECT	c Signature of Registered Age FORS: Delete	ent	Date
the State IGNATUF  FFICERS tle: ame: ddress:	Electronic  S AND DIRECT  PT ()I  DUFFEY, TIM H  1431 LAIRD RO/ CRESTVIEW, FL  VT ()I  BREWER, JIM	c Signature of Registered Age FORS: Delete AD . 32539 Delete	ent  ADDITIONS/CHAN  Title: Name: Address:	Date  IGES TO OFFICERS AND DIRECTOR
the State GNATUF  FFICERS  le: ime: dress: ty-St-Zip: le: ime: dress:	Electronic  S AND DIRECT  PT ()I  DUFFEY, TIM H  1431 LAIRD RO/ CRESTVIEW, FL  VT ()I  BREWER, JIM  1641 CROWDEF CRESTVIEW, FL	c Signature of Registered Age ORS: Delete AD . 32539 Delete R CHAPEL ROAD . 32539 Delete E KEROAD	ADDITIONS/CHAN  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  IGES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

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: MALINDA BREWER TT 03/31/2006