

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002476

FILED  
Jan 03, 2006  
Secretary of State

**Entity Name:** CHANGED BY GRACE COMMUNITY CHURCH, INC.

**Current Principal Place of Business:**

49 BOWLAN STREET N  
JACKSONVILLE, FL 32211

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 26041  
JACKSONVILLE, FL 32226

**New Mailing Address:**

**FEI Number:** 30-0057425

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEREFORD, STEVEN R  
1804 STARRATT ROAD  
JACKSONVILLE, FL 32226 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: HEREFORD, STEVEN R  
Address: 1804 STARRATT ROAD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: DS ( ) Delete  
Name: MILLER, MICHAEL H  
Address: 13521 ADCOCK ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: DT ( ) Delete  
Name: BYRNES, DARRELL B  
Address: 2447 SNOWY EGRET DRIVE  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete  
Name: MERKLE, ROY A  
Address: 12540 MOOSE ROAD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: D (X) Delete  
Name: BOYETTE, MATTHEW E  
Address: 9761 BRADLEY ROAD  
City-St-Zip: JACKSONVILLE, FL 32246

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DT (X) Change ( ) Addition  
Name: BYRNES, DARRELL B  
Address: 4420 HARTMAN ROAD  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D (X) Change ( ) Addition  
Name: MERKLE, ROY A  
Address: 12540 MOOSE ROAD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: DS (X) Change ( ) Addition  
Name: BOYETTE, MATTHEW E  
Address: 9761 BRADLEY ROAD  
City-St-Zip: JACKSONVILLE, FL 32246

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: STEVEN R HEREFORD

DP

01/03/2006

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

\_\_\_\_\_  
Date