

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006419

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** GRACE COMMUNITY BAPTIST CHURCH OF GILCHRIST COUNTY, INC.

**Current Principal Place of Business:**

1579 NE 100 ST  
BRANFORD, FL 32008 US

**New Principal Place of Business:**

**Current Mailing Address:**

89 NE 112 PLACE  
BRANFORD, FL 32008 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

PHILLIPS, ROBERT LEE  
89 NE 112TH PLACE  
BRANFORD, FL 32008 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: D ( ) Delete  
Name: DIXON, MITA  
Address: 1579 NE 100 STREET  
City-St-Zip: BRANFORD, FL 32008 US

Title: D ( ) Delete  
Name: KRAMME, SHARON  
Address: 2009 COUNTY ROAD 138  
City-St-Zip: BRANFORD, FL 32008 US

Title: D ( ) Delete  
Name: PHILLIPS, ROBERT L  
Address: 89 NE 112TH PLACE  
City-St-Zip: BRANFORD, FL 32008 US

Title: D ( ) Delete  
Name: KRAMME, MARVIN  
Address: 2009 COUNTY ROAD 138  
City-St-Zip: BRANFORD, FL 32008 US

**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 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: ROBERT LEE PHILLIPS

D

04/14/2009

Electronic Signature of Signing Officer or Director

Date