

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90242 047 ****70.00

DOCUMENT # N02000006882

1. Entity Name

GRACE BIBLE CHURCH OF PINELLAS, INC.



Principal Place of Business

5430 LEMON TREE LANES
PINELLAS PARK FL 33782

Mailing Address

5430 LEMON TREE LANES
PINELLAS PARK FL 33782

2. Principal Place of Business

222 LINCOLN AVE S.

3. Mailing Address

222 LINCOLN AVE S.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CLEARWATER FL.

City & State

CLEARWATER FL

4. FEI Number

113650553

Applied For

Not Applicable

Zip

33756

Country

PINELLAS

Zip

33756

Country

PINELLAS

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GREENE, RICHARD B
5430 LEMON TREE LANES
PINELLAS PARK FL 33782

7. Name and Address of New Registered Agent

Name: GREENE, RICHARD B
Street Address (P.O. Box Number is Not Acceptable):
222 LINCOLN AVE SOUTH
City: CLEARWATER FL Zip Code: 33756

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

02/10/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	NEYMOUR, DEREK	
STREET ADDRESS	222 LINCOLN AVE S	
CITY-ST-ZIP	CLEARWATER FL 33756	
TITLE	DVST	<input type="checkbox"/> Delete
NAME	GREENE, RICHARD B	
STREET ADDRESS	5430 LEMON TREE LANES	
CITY-ST-ZIP	PINELLAS PARK FL 33782	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WATTS, STEPHEN G	
STREET ADDRESS	1749 LAKEVIEW DRIVE	
CITY-ST-ZIP	CLEARWATER FL 33756	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SEC.	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHIRLEY MYERS	
STREET ADDRESS	2534 ESTANCIA BLVD	
CITY-ST-ZIP	CLEARWATER 33761	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

REQUIRED

02/10/03 727 547 6825

CR2E037 (10/02)