

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 11, 2011**  
**Secretary of State**

DOCUMENT# N03000006587

**Entity Name:** GRAPEVINE COMMUNITY CHURCH, A UNITED METHODIST CHURCH CORP**Current Principal Place of Business:**4311 SW DARWIN BLVD  
PORT ST. LUCIE, FL 34953**New Principal Place of Business:****Current Mailing Address:**4311 SW DARWIN BOULEVARD  
PORT ST. LUCIE, FL 34953**New Mailing Address:****FEI Number:** 59-1371912**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CURCIO, SUE  
211 SW GETTYSBURG DRIVE  
PORT ST. LUCIE, FL 34953 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: P  
Name: TURNER, JOSEPH  
Address: 256 SE CROSSPOINT  
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: SEC  
Name: TEST, FRED A  
Address: 1437 SW MEDINA AVENUE  
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: TREA  
Name: CURCIO, SUSAN  
Address: 211 SW GETTYSBURG DRIVE  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: FSEC  
Name: HUGHES, SHARON  
Address: 1818 SW LOFGREN AVENUE  
City-St-Zip: PORT ST. LUCIE, FL 34953

I hereby 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 all other like empowered.

SIGNATURE: DAVID S. LEWALLEN

VP

07/11/2011

Electronic Signature of Signing Officer or Director

Date