

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002088

FILED
Apr 22, 2008
Secretary of State

Entity Name: GRACE AND TRUTH ASSEMBLY INC., AT SPRING HILL

Current Principal Place of Business:

11378 DEERCROFT CT
SPRINGHILL, FL 34609

New Principal Place of Business:

210 BELL AVE
BROOKSVILLE, FL 34601 US

Current Mailing Address:

11378 DEERCROFT CT
SPRINGHILL, FL 34609

New Mailing Address:

P.O. BOX 6865
SPRING HILL, FL 34611 US

FEI Number: 20-8670318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANSTED, ROBERT M
1378 DEERCROFT CT
SPRINGHILL, FL 34609 US

Name and Address of New Registered Agent:

ANSTED, ROBERT M
11378 DEERCROFT CT
SPRING HILL, FL 34609 US

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:

04/22/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANSTED, ROBERT M
Address: 11378 DEERCROFT CT
City-St-Zip: SPRINGHILL, FL 34609

Title: SD () Delete
Name: MAHONEY, STEVEN
Address: 15035 TONI TERRACE
City-St-Zip: HUDSON, FL 34669

Title: TD () Delete
Name: BARRETT, NICHOLAS E
Address: 8450 MADRID RD
City-St-Zip: WEEKI WACHEE, FL 34613

Title: D () Delete
Name: BURROWES, EDWARD E
Address: 1309 CANOPY OAKS
City-St-Zip: MINNEOLA, FL 34715

Title: D () Delete
Name: JOHN, EMANUEL V
Address: 8196 PHILATELIC DRIVE
City-St-Zip: SPRING HILL, FL 34606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANSTED, ROBERT M
Address: 11378 DEERCROFT CT
City-St-Zip: SPRING HILL, FL 34609

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 M. ANSTED

PD

04/22/2008

Electronic Signature of Signing Officer or Director

Date