
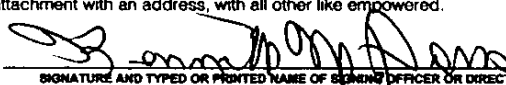


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 22, 2008 8:00 am**  
**Secretary of State**

01-22-2008 90053 018 \*\*\*\*61.25

<b>DOCUMENT # N07000007248</b> 1. Entity Name <b>AMAZING GRACE LUTHERAN CHURCH, INC.</b>					
Principal Place of Business <b>4060 CR 108 OXFORD, FL 34484</b>			Mailing Address <b>PO BOX 104 OXFORD, FL 34484</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
<div style="display: flex; justify-content: space-between;"> <span>01062008</span> <span>Chg-NP</span> <span>CR2E037 (12/06)</span> </div>					
4. FEI Number <b>26-0789880</b>				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  <b>HOVIS, KENNETH M 9198 SE 120TH LOOP SUMMERFIELD, FL 34491</b>			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOVIS, KENNETH M 9198 SE 120TH LOOP SUMMERFIELD, FL 34491 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCHAEFER, LOIS E 668 FARMINGTON AVE THE VILLAGES, FL 32162 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GREWE, JANICE E 9515 SE 171ST ARGYLL ST THE VILLAGES, FL 32159 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCDONALD, PATRICK M 640 TERNBERRY FOREST DR THE VILLAGES, FL 32162 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director McDonald, Patrick M <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 640 Ternberry Forest Drive The Villages, FL 32162	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROCKEY, JAMES H 3216 HOPEWELL STREET THE VILLAGES, FL 32162 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>Treasurer</del> Beverly J. Cahill <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Beverly J. Cahill <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Treasurer 744 Evelyn Ln Loop The Villages, FL 32162	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b>  <span style="float: right;">Jan 19, 2008 359-454-5736</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <span style="float: right;"><small>Daytime Phone #</small></span>					
Kenneth M. Hovis					