

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000010086

**FILED**  
**Apr 07, 2012**  
**Secretary of State**

**Entity Name:** GRACE TABERNACLE BAPTIST CHURCH OF MARTIN COUNTY, INC.

**Current Principal Place of Business:**

256 SE SAINT LUCIE BLVD  
APT.104  
STUART, FL 34996 US

**New Principal Place of Business:**

4739 SE SALVATORI RD  
STUART, FL 34997 US

**Current Mailing Address:**

256 SE SAINT LUCIE BLVD  
APT.104  
STUART, FL 34997 US

**New Mailing Address:**

4739 SE SALVATORI RD  
STUART, FL 34997 US

**FEI Number:** 26-1591039

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ETIENNE, RONNY PASTOR  
256 SE SAINT LUCIE BLVD  
APT.104  
STUART, FL 34997 US

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

ETIENNE, RONNY PASTOR  
4739 SE SALVATORI RD  
STUART, FL 34997 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:

04/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: PARFAIT, ALISENA  
Address: 3494 SE JAKE COURT #66  
City-St-Zip: STUART, FL 34994 US

Title: D  
Name: PARFAIT, RICHARDSON  
Address: 2615 SE BONITA STREET  
City-St-Zip: STUART, FL 34997 US

Title: D  
Name: ETIENNE, RONNY  
Address: 4739 SE SALVATORI RD  
City-St-Zip: STUART, FL 34997 US

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: RONNY ETIENNE

REV

04/07/2012

Electronic Signature of Signing Officer or Director

Date