## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N11133

FILED Feb 04, 2009 Secretary of State

Entity Name: GRACE COMMUNITY CHURCH OF NAPLES, INC. **New Principal Place of Business: Current Principal Place of Business:** 5524 19TH CT. SW NAPLES, FL 34116 **Current Mailing Address: New Mailing Address:** 5524 19TH CT. SW NAPLES, FL 34116 FEI Number: 59-2585699 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCINTYRE, ELLSWORTH E. 3590 23RD AVE S.W. NAPLES, FL 34117 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition MCINTYRE, ELLSWORTH, E Name: Name: Address: 3590 23RD SW Address: City-St-Zip: NAPLES, FL 34116 City-St-Zip: Title: SD Title: ( ) Delete () Change () Addition MCINTYRE, P L, Name: Name: Address: 3590 23RD AVE SW Address: City-St-Zip: NAPLES, FL 34116 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition HARRISON, F L, HARRISON, F L, Name: Name: 4211 CINDY AVE 4980 LE BUFF RD. Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34114

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: F. L. HARRISON TD 02/04/2009