## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N16731

FILED Apr 29, 2009 Secretary of State

Entity Name: THE GRACE BAPTIST CHURCH OF EUSTIS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 19650 E. S. R. 44 EUSTIS, FL 32736 **Current Mailing Address: New Mailing Address:** 19650 E. S. R. 44 EUSTIS, FL 32736 FEI Number: 59-3319357 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JONES, DONNIER TRES JONES, LINDA M S 19650 E. S.R. 44 19650 E. S.R. 44 EUSTIS, FL 32736 EUSTIS, FL 32736 US 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: LINDA M. JONES 04/29/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DT () Change () Addition () Delete JONES, RON Name: Name: 37236 SLICE LN Address: Address: City-St-Zip: GRAND ISLAND, FL 32735 City-St-Zip: Title: ( ) Delete Title: () Change () Addition WEISER, WENDY Name: Name: Address: 21751 DAIRY ROAD Address: City-St-Zip: EUSTIS, FL 32736 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition ROGERS, JAMES D Name: ROGERS, JIMMIE D Name: 1312 OLD MT DORA RD Address: Address: 21023 GAINER RD City-St-Zip: EUSTIS, FL 32726 City-St-Zip: EUSTIS, FL 32736 Title: ( ) Delete Title: () Change () Addition Name: TRIVETT, DANIEL B Name: 700 N. HAWLEY ST. Address: Address: City-St-Zip: EUSTIS, FL 32726 City-St-Zip: Title: () Delete Title: () Change () Addition FAIRBURN, LYNDA Name: Name: 3226 WEKIVA ROAD Address: Address: City-St-Zip: TAVARES, FL 32778 City-St-Zip: Title: () Delete Title: () Change () Addition BROWN, DON Name: Name: Address: 29 E LEMON AVE Address: EUSTIS, FL 32726 City-St-Zip: 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: JIMMIE D, ROGERS T 04/29/2009