

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27563

FILED
Jan 05, 2008
Secretary of State

Entity Name: GRACE BAPTIST CHURCH OF CITRUS SPRINGS, FLORIDA, INC.

Current Principal Place of Business:

2672 W EDISON PLACE
CITRUS SPRINGS, FL 34434 US

New Principal Place of Business:

Current Mailing Address:

2672 W EDISON PLACE
CITRUS SPRINGS, FL 34434 US

New Mailing Address:

FEI Number: 59-2907222 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BROSSEAU, RICHARD W REV
2986 N CAMILO DRIVE
CITRUS SPRINGS, FL 34434 US

Name and Address of New Registered Agent:

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:

Title: O () Delete
Name: BROSSEAU, RICHARD W REV
Address: 2986 N CAMILO DRIVE
City-St-Zip: CITRUS SPRINGS, FL 34434 US

Title: D () Delete
Name: CARPENTER, CARLTON REV
Address: 9196 FAWN WAY, NORTH
City-St-Zip: CITRUS SPRINGS, FL 34434 US

Title: D () Delete
Name: TOWSLEY, MARTIN J MR
Address: 524 SOUTH MONROE STREET
City-St-Zip: BEVERLY HILLS, FL 34465 US

Title: D () Delete
Name: ETCHISON, WILLIAM MR
Address: 11675 SW 140TH LOOP
City-St-Zip: DUNNELLON, FL 34432 FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RICHARD W. BROSSEAU

REV.

01/05/2008

Electronic Signature of Signing Officer or Director

Date