2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT DOCUMENT # N34882

FILED Apr 27, 2004 8:00 am Secretary of State

1. Entity Name GLYNLEA	GRACE UNITED METHODI	ST CHURCH, INC			04	-27-2004 90	0090 04	.1 *****6	1.25
Principal Place of Business Mailing Address 6429 ATLANTIC BLVD 6429 ATLANTIC BLVD JACKSONVILLE, FL 32211 JACKSONVILLE, FL 32211									
2. Principal Place of Business 3. Mailing Address									
Suite, Apt.	Suite, Apt. #, etc.		Suite, Apt. #, etc.		03052004 Chg	NP (CR2E037	(10/03)	
City & State		City & State	City & State		4. FEI Number 59-0809625			 	plied For at Applicable
Zip	Zip Country		Country	5. Certificate of Status Desired				\$8.75 Additional Fee Required	
	6. Name and Address of Current Re	gistered Agent	d Agent		7. Name and Address of New Registered Agent				
RICH, CHARLES 1495 RIVER HILLS CIRCLE E				Name Street Address (P.O. Box Number is Not Acceptable)					
JACKSON	VILLE, FL 32211-7517								······································
			City			· · · · · · · · · · · · · · · · · · ·	FL	Zip Cod	e
	named entity submits this statement for those of registered agent. Signsture, typed or printed name of registered agent and	t stie if applicable. (NOT)	E: Registered Agent sig	nature required w	hen reinstating)		DATE		
! [Filing Fee Is \$61.25 Due by May 1, 2004		S. Election Campaign Financing Trust Fund Contribution.		5.00 May Be Added to Fees			payable to nent of Si	
10.	OFFICERS AND DIRE	CTORS	11.	ΑE	DITIONS/CHANGES	TO OFFICERS.	AND DIRE	CTORS IN	10
TITLE	TP	Delete	TITLE	+			[Change	Addition
NAME STREET ADDRESS	RICH, CHARLES 1495 RIVER HILLS CIRCLE E		NAME	700	M KATTER	HENRY	_		
CITY-ST-ZIP	1100 111121111120 0111022				ч каттек Маттек		in.		
	JACKSONVILLE, FL 322117517		STREET ADDRES	s 572	MATTERN	DAN B	_		
TITLE	JACKSONVILLE, FL 322117517	☐ Delete	STREET ADDRES	572 3700	Matter H LODGLVILLE	FL 30	3216	Change	12 Audition
TITLE NAME)	☐ Delete	STREET ADDRES	572 3700	Matter H LODGLVILLE	FL 30	3216	Change	□ Audition
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NAME STREET ADDRESS CITY-ST-ZIP	T TRAPP, SHIRLEY 3424 EMAN DRIVE JACKSONVILLE, FL 32216 T	·	STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE	S 57A JACK LAN S 190: JACK TERE 578	MATTER HEDDONNIED PHEDRE SCHOOLS EDA CHIC BAY RIC	TMAN FL 35 TMAN OF EC 3	3 <i>33</i> 33	3 Y Change	
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indicated on this report of 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.

SIGNATURE: