

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 29 AM 7:30**

DOCUMENT # N39638

(4)

1. Corporation Name

GRACE FELLOWSHIP BIBLE CHURCH, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/22/1990	3a. Date of Last Report 03/31/1994
4. FEI Number 59-3025872	Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

Principal Place of Business		Mailing Address	
SPORTSMAN'S PARK E. GAUCHO CIR. DELTONA FL 32725 US		C/O CHESTER A PIERCE 1200 E HANCOCK DR. DELTONA FL 32725-642 US	
2. Principal Place of Business	2a. Mailing Address	21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State	23. Zip	28. Zip
24. Country	25. Country	29. Country	30. Country

9. Name and Address of Current Registered Agent

**PIERCE, CHESTER A.
1200 E. HANCOCK DR
DELTONA FL 32725**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	STAMM, JOHN	1.2 NAME	
STREET ADDRESS	1143 WYCLIFFE	1.3 STREET ADDRESS	
CITY-ST-ZIP	DELTONA FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	GOODE, GARY	2.2 NAME	
STREET ADDRESS	671 W. PALM VALLEY DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	OVIEDO FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	PIERCE, CHESTER A.	3.2 NAME	
STREET ADDRESS	1200 E HANCOCK	3.3 STREET ADDRESS	
CITY-ST-ZIP	DELTONA FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Chester A. Pierce **Chester A. Pierce** 3-20-95 407.333-6112

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature 14-0000