


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 27, 2008 08:00 AM
Secretary of State

DOCUMENT # N46128 1. Entity Name GRACE CHRISTIAN CHURCH OF PENSACOLA, INC.	
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Principal Place of Business 9921 CHEMSTRAND ROAD PENSACOLA, FL 32514 US	Mailing Address 9921 CHEMSTRAND RD PENSACOLA, FL 32514 US
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DO NOT WRITE IN THIS SPACE



01212008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3096941	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**SPARKS, JACK W.
3341 TOMPKINS ST
PENSACOLA, FL 32504**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinitiating) _____ DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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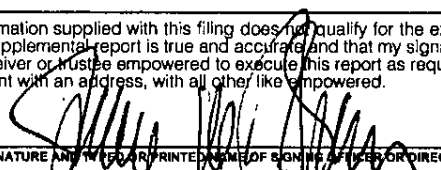
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SPARKS, JACK W. 3341 TOMPKINS ST PENSACOLA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SPARKS, CHERI L. 3341 TOMPKINS ST PENSACOLA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PATCH, KAREN 860 CODY LN #2 PENSACOLA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/11/08-80003-016 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 	JACK W. SPARKS	02/17/08	850-476-8203
SIGNATURE AND TITLE OF REGISTERED AGENT		Date	Daytime Phone #