

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49124

FILED
Apr 19, 2005
Secretary of State

Entity Name: GRACE CHURCH OF LAKE LAND, INC.

Current Principal Place of Business:

2320 SLEEPY HILL RD
LAKE LAND, FL 33810

New Principal Place of Business:

Current Mailing Address:

2320 SLEEPY HILL RD
LAKE LAND, FL 33810

New Mailing Address:

FEI Number: 59-3095606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, MICHAEL G
5640 HILLVIEW CT
LAKE LAND, FL 33810 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: CD () Delete
Name: SMITH, OWEN
Address: 7558 GUNSTOCK DR.
City-St-Zip: LAKE LAND, FL 33809

Title: M () Delete
Name: WILLIAMS, MIKE
Address: 5640 HILLVIEW CT.
City-St-Zip: LAKE LAND, FL 33810

Title: MD () Delete
Name: HINDER, JIM
Address: 4835 MUSKET DRIVE
City-St-Zip: LAKE LAND, FL

Title: CD () Delete
Name: SMITH, STEVE
Address: 1326 WYNGATE DR.
City-St-Zip: LAKE LAND, FL 33809

Title: M () Delete
Name: WILLIAMS, TERICA
Address: 5619 BLOOMFIELD BLVD
City-St-Zip: LAKE LAND, FL 33810

Title: CD () Delete
Name: LASH, KEN
Address: 923 SOUTH BLVD.
City-St-Zip: LAKE LAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: SMITH, OWEN
Address: 638 JAMICA CIRCLE
City-St-Zip: LAKE LAND, FL 33803

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MD (X) Change () Addition
Name: HINDER, JIM
Address: 4835 MUSKET DRIVE
City-St-Zip: LAKE LAND, FL 33810

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: M (X) Change () Addition
Name: WILLIAMS, TERICA
Address: 5640 HILLVIEW CT.
City-St-Zip: LAKE LAND, FL 33810

Title: CD (X) Change () Addition
Name: LASH, KEN
Address: 423 E. LAKE BONNY DRIVE.
City-St-Zip: LAKE LAND, FL 33801

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL G. WILLIAMS

AGEN

04/19/2005

Electronic Signature of Signing Officer or Director

Date