

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 18, 2005
Secretary of State

DOCUMENT# N93000000393

Entity Name: GRACE FAMILY CHURCH, INC.

Current Principal Place of Business:

2910 NORWAY PINE LANE
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 22222
WEST PALM BEACH, FL 334162222

New Mailing Address:

FEI Number: 65-0386183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LADD, BRIAN K
43 MEADOWS DRIVE
BOYNTON BEACH, FL 33436 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: STD () Delete
Name: RAY, JOE
Address: 2565 CEDARCREST RD
City-St-Zip: WEST PALM BEACH, FL

Title: D () Delete
Name: RAPE, PHYLLIS
Address: 1618 NE 4TH CT
City-St-Zip: BOYNTON BEACH, FL 33435

Title: PD () Delete
Name: MCDANIEL, JOHNNY F
Address: 2910 NORWAY PINE LANE
City-St-Zip: LANTANA, FL 33462

Title: VPD () Delete
Name: LADD, BRIAN K
Address: 43 MEADOWS DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Delete
Name: RAPE, JAMES L
Address: 3883 BLUE SPRUCE COURT
City-St-Zip: LANTANA, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: RAY, JOE
Address: 2565 CEDARCREST RD
City-St-Zip: WEST PALM BEACH, FL

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: TD (X) Change () Addition
Name: RAPE, JAMES L
Address: 3883 BLUE SPRUCE COURT
City-St-Zip: LANTANA, FL 33462

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: BRIAN K. LADD

VPD

05/18/2005

Electronic Signature of Signing Officer or Director

_____ Date