


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90144 001 ****70.00

DOCUMENT # N93000000393			
1. Entity Name GRACE FAMILY CHURCH, INC.			
Principal Place of Business 2910 NORWAY PINE LANE LANTANA, FL 33462		Mailing Address P.O. BOX 22222 WEST PALM BEACH, FL 33416-2222	
2. Principal Place of Business - No P.O. Box # 5292 SE Graham Dr Suite, Apt. #, etc.		3. Mailing Address 5292 SE Graham DR Suite, Apt. #, etc.	
City & State Lantana FL FL Stuart FL		City & State Stuart FL	
Zip 34997		Country US	
4. FEI Number 65-0386183		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		01232008 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent MCDANIEL, JOHNNY F 2910 NORWAY PINE LANE LANTANA, FL 33462		7. Name and Address of New Registered Agent Name James Rape Street Address (P.O. Box Number is Not Acceptable) 5292 SE Graham Drive City Stuart FL Zip Code 34997	
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 <u>James Rape</u> DATE <u>04/22/08</u> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
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	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE VPD <input checked="" type="checkbox"/> Delete	NAME RAPE, PHYLLIS	TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME Schroderus-Rowe, Hilka
STREET ADDRESS 5292 S.E. GRAHAM DR.	CITY-ST-ZIP STUART, FL 34997	STREET ADDRESS P.O. Box 21233	CITY-ST-ZIP WPB, FL 33416
TITLE PD <input checked="" type="checkbox"/> Delete	NAME MCDANIEL, JOHNNY F	TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME MARIE GROSSKOPF
STREET ADDRESS 2910 NORWAY PINE LANE	CITY-ST-ZIP LANTANA, FL 33462	STREET ADDRESS 810 23RD AVE, N.	CITY-ST-ZIP LAKE WORTH, FL 33460
TITLE SD <input checked="" type="checkbox"/> Delete	NAME RAY, JOE	TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME Ruth Deese
STREET ADDRESS 2565 CEDARCREST RD.	CITY-ST-ZIP WEST PALM BEACH, FL 33415	STREET ADDRESS 302 JACKSON AVE.	CITY-ST-ZIP GREENACRES FL 33463
TITLE TD <input checked="" type="checkbox"/> Delete	NAME RAPE, JAMES L	TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME Rhonda Grosskopf
STREET ADDRESS 5292 S.E. GRAHAM DR.	CITY-ST-ZIP STUART, FL 34997	STREET ADDRESS 810 23RD AVE	CITY-ST-ZIP LAKE WORTH FL 33460
TITLE <input type="checkbox"/> Delete	NAME Ruth Deese	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME James L Rape
STREET ADDRESS 2565 Cedarcrest Rd	CITY-ST-ZIP West Palm Beach FL 33415	STREET ADDRESS 5292 SE Graham Drive	CITY-ST-ZIP Stuart FL 34997
TITLE <input type="checkbox"/> Delete	NAME Rhonda Grosskopf	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 810 23rd Ave N.	CITY-ST-ZIP Lake Worth FL 33460		
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: <u>James Rape</u>		Date _____ Daytime Phone # _____	