

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003951

FILED
Jan 05, 2006
Secretary of State

Entity Name: GRACE VALLEY BAPTIST CHURCH, INC.

Current Principal Place of Business:

CHURCH
1985 HWY 29 NORTH
CANTONMENT, FL 32533 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 31
CANTONMENT, FL 32533 US

New Mailing Address:

FEI Number: 59-3202323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEESE, DONALD R
3811 WILDER RD
CANTONMENT, FL 32533 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: PD () Delete
Name: NEESE, DONALD R
Address: 3811 WILDER RD
City-St-Zip: CANTONMENT, FL 32533

Title: D () Delete
Name: NEESE, MICHAEL
Address: 3812 WILDER ROAD
City-St-Zip: CANTONMENT, FL 32533

Title: D () Delete
Name: TRUITT, MICHAEL
Address: 1451 HWY 95 NORTH
City-St-Zip: CANTONMENT, FL 32533

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: DONALD R NEESE

PD

01/05/2006

Electronic Signature of Signing Officer or Director

Date