

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000004851

1. Entity Name

GRACE COMMUNITY CHAPEL OF PORT ST. JOHN, INC.

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 90004 020 ****61.25

040146



DO NOT WRITE IN THIS SPACE

Principal Place of Business

4295 GARDEN ST
TITUSVILLE FL 32796
US

Mailing Address

2939 SHEPARD DR
ROCKLEDGE FL 32955
US

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

6236 Brandt St.

Suite, Apt. #, etc.

City & State

City & State

Port St. John, FL

4. FEI Number

59-3217728

Applied For

Not Applicable

Zip

Country

Zip

32927

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REPP, JAMES E
2939 SHEPARD DR
ROCKLEDGE FL 32955

7. Name and Address of New Registered Agent

Name

SAME

Street Address (P.O. Box Number is Not Acceptable)

6236 Brandt St.

City

Port St. John, FL

FL

Zip Code

32927

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
☐ Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
GROSSMANN, JAMES H
4090 VANCOUVER AVE
COCOA FL 32926 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
OLGUIN, LEON
3775 FELDA STREET
COCOA FL 32926 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
REPP, JAMES E
293 SHEPARD DR
ROCKLEDGE FL 32955 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
James E. Repp
6236 Brandt St.
Port St. John, FL 32927 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: James E. Repp 04/26/01 (321) 634-5276

CR2E037 (10/00)