

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000005666

**FILED**  
**Mar 02, 2004**  
**Secretary of State****Entity Name:** GRACE BAPTIST CHURCH OF CENTRAL FL, INC.**Current Principal Place of Business:**919 LONGWOOD HILLS ROAD  
LONGWOOD, FL 32750 US**New Principal Place of Business:****Current Mailing Address:**114 BEAUFORT DR.  
LONGWOOD, FL 32779 US**New Mailing Address:****FEI Number:** 59-3225273**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**THOMPSON, DAVID  
114 BEAUFORT DR.  
LONGWOOD, FL 32779 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:** P/T ( ) Delete  
**Name:** TICE, JAMES,  
**Address:** 8 W. THRUSH  
**City-St-Zip:** APOPKA, FL 32712**Title:** V/T ( ) Delete  
**Name:** EDMONDS, ALLEN  
**Address:** 228 BUTTON WOOD  
**City-St-Zip:** WINTER SPRINGS, FL 32708**Title:** T/T ( ) Delete  
**Name:** YELVERTON, BETTY J  
**Address:** 407 SATSUMA DR  
**City-St-Zip:** SANFORD, FL 32771**Title:** S/T ( ) Delete  
**Name:** BURCH, GILBERT D  
**Address:** 358 HANGING MOSS  
**City-St-Zip:** LAKE MARY, FL 32746**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** T/T (X) Change ( ) Addition  
**Name:** BURCH, GILBERT O  
**Address:** 358 HANGING MOSS  
**City-St-Zip:** LAKE MARY, FL 32746**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 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: JAMES TICE

P/T

03/02/2004

Electronic Signature of Signing Officer or Director

Date