

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000001510 (6)

1. Corporation Name

GRACE CHURCH OF TAMPA, INC.



Principal Place of Business

7710 ANN BLVD
TAMPA FL 33634
US

Mailing Address

7710 ANN BLVD
TAMPA FL 33634
US

3. Date Incorporated or Qualified
03/23/1994

3a. Date of Last Report
08/03/1995

2. Principal Place of Business

2a. Mailing Address

21 5607 Interbay Blvd.
Suite, Apt. #, etc.

26 6201 Adelia Ave.
Suite, Apt. #, etc.

4. FEI Number
59-3244539

Applied For
Not Applicable

22 City & State
Tampa, Fla.

27 City & State
Tampa, Fla.

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

24 Zip
33611

25 Country
Hills

29 Zip
33616

30 Country
Hills.

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REGISTERED CORPORATE AGENTS INC
612 S GREENWOOD AVE
CLEARWATER FL 34616

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME WHALEY, H H
STREET ADDRESS 6201 ADELIA AVE
CITY - ST - ZIP TAMPA FL 33616

TITLE D ☐ DELETE
NAME GREEN, LEWIS Y
STREET ADDRESS 6336 S RENELLIE CT
CITY - ST - ZIP TAMPA FL 33616-1339

TITLE D ☐ DELETE
NAME OSBORNE, CECIL
STREET ADDRESS 113 BEE STREET
CITY - ST - ZIP TAMPA FL 33611

TITLE D ☒ DELETE
NAME TUCKER, TOM
STREET ADDRESS 3813 W IOWA AVE
CITY - ST - ZIP TAMPA FL 33616

TITLE D ☐ DELETE
NAME GONZALEZ, ANTONIO
STREET ADDRESS 5215 S WESTSHORE BLVD APT 54
CITY - ST - ZIP TAMPA FL 33611-5665

TITLE D ☐ DELETE
NAME REDMOND, KYONG H
STREET ADDRESS 3902 W IOWA AVE
CITY - ST - ZIP TAMPA FL 33616

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

BOONCHALIEW, Udom
218 Lookout Drive
Apollo Beach, Fla.
33572

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

4015 Mango
Tampa, Fla. 33616

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

2626 Tyson
Tampa, Fla. 33611

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/10/96

813 837 0079

CR2E037 (12/95)