2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# N94000001748

Entity Name: GRACE FELLOWSHIP CONGREGATIONAL CHURCH, INC.

Current Principal Place of Business:

2401 S PARK AVE
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

2401 S PARK AVE
SANFORD, FL 32771

New Mailing Address:

FEI Number: 59-2388130 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BEDENBAUGH, LARRY
3321 CRIMSON LANE
DELTONA, FL 32738 US

Name and Address of New Registered Agent:

BEDENBAUGH, LARRY
975 VICKSBURG ST.
DELTONA, FL 32725 US

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: _____ 03/20/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: LEONARD, WILLIAM
Address: 207 JUSTIN WAY
City-St-Zip: SANFORD, FL 32773

Title: T ( ) Delete
Name: UNSWORTH, ELIOSE M
Address: 233 COUNCIL BLUFFS DR
City-St-Zip: DELTONA, FL 32725

Title: T ( ) Delete
Name: BEDENBAUGH, LARRY
Address: 321 CRIMSON LANE
City-St-Zip: DELTONA, FL 32738

Title: T ( ) Delete
Name: SANDERS, ANNA
Address: 215 HAYS DR
City-St-Zip: SANFORD, FL 32771

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition
Name: LEONARD, WILLIAM
Address: 519 E 1ST ST. APT. 606
City-St-Zip: SANFORD, FL 32771

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

Title: T (X) Change ( ) Addition
Name: BEDENBAUGH, LARRY
Address: 975 VICKSBURG ST.
City-St-Zip: DELTONA, FL 32725

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

Title: D ( ) Change (X) Addition
Name: LEONARD, LARRY L
Address: 207 JUSTIN WAY
City-St-Zip: SANFORD, FL 32773

I hereby certify that the information supplied with this filing does not qualify 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: LARRY L. LEONARD D 03/20/2009
Electronic Signature of Signing Officer or Director — Date