

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000002886

1. Entity Name

GRACE CHURCH MINISTRY, INC.

Principal Place of Business

GRACE CHURCH MINISTRY, INC.  
18201 N.W. 37 AVE.  
MIAMI FL 33054  
US

Mailing Address

3470 N.W. 171 TERR  
MIAMI FL 33056

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0513166

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WRIGHT, JAMES  
3470 NW 171ST TER  
MIAMI FL 33055

Name

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

City

FL

Zip Code

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

*James Wright, PRESIDENT, JAMES WRIGHT*

4/27/01

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete  
NAME WRIGHT, JAMES REV  
STREET ADDRESS 3470 N.W. 171 TERR  
CITY-ST-ZIP OPA LOCKA FL 33056

TITLE VICE PRESIDENT. ☐ Change ☒ Addition  
NAME ANNA D. WRIGHT  
STREET ADDRESS 3470 NW 171 TERR  
CITY-ST-ZIP OPA LOCKA, FL. 33056

TITLE S ☐ Delete  
NAME ANDERSON, MARGIE W  
STREET ADDRESS 4275 N.W. 182 STREET  
CITY-ST-ZIP MIAMI FL 33056

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

TITLE T ☐ Delete  
NAME SEALS, MARY  
STREET ADDRESS 1791 N.W. 151 STREET  
CITY-ST-ZIP OPA LOCKA FL 33054

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

TITLE BOTP ☐ Delete  
NAME BANKS, MARSHALL  
STREET ADDRESS 20901 N.W.37 AVE.  
CITY-ST-ZIP MIAMI FL 33056

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

TITLE BOT ☒ Delete  
NAME WEAVER, RONALD  
STREET ADDRESS 4275 N.W. 182 STREET  
CITY-ST-ZIP MIAMI FL 33056

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

TITLE BOT ☐ Delete  
NAME SEALS, GAIL  
STREET ADDRESS 12601 N.W. 27TH AVE., APT. 312  
CITY-ST-ZIP MIAMI FL 33165

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

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 Wright, JAMES WRIGHT*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/01 305-624-6171

Date

Daytime Phone #

00049065



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)