

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000003034

1. Entity Name

GRACE BAPTIST CHURCH OF CANAVERAL GROVES, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90074 021 ****61.25

Principal Place of Business

Mailing Address

3935 NO. HIGHWAY 1
UNIT F
COCOA FL 32926

3935 NO. HIGHWAY 1
UNIT F
COCOA FL 32926

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

59-3302017

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

SEALE, RANDALL D
360 RIVERSIDE AVE
MERRITT ISLAND FL 32953

Name

SEALE, RANDALL D

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

3141 WINCHESTER DR

City

COCOA

FL

Zip Code

32926

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME D
STREET ADDRESS SWINSON, ROY C
CITY-ST-ZIP 30 HIGHLAND ST
COCOA FL

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

TITLE ☐ Delete
NAME D
STREET ADDRESS SEALE, RANDALL D
CITY-ST-ZIP 360 RIVERSIDE AVE
MERRITT ISLAND FL 32953

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS SEALE, RANDALL D
CITY-ST-ZIP 3141 WINCHESTER DR
COCOA, FL 32926

TITLE ☐ Delete
NAME D
STREET ADDRESS COVERT, CAROL
CITY-ST-ZIP 2602 TULANE DR
COCOA FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS COVERT, CAROL
CITY-ST-ZIP 1911 BARRINGTON CIR
ROCKLEDGE, FL 32955

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

RANDALL D. SEALE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)