

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # N94000005936

1. Entity Name
GRACE PRESBYTERIAN CHURCH, ASSOCIATE
REFORMED SYNOD, INC.



Principal Place of Business Mailing Address

DEVER, GARLAND E 1111 TUSKAWILLA RD
WINTER SPRINGS, FL 32708 US WINTER SPRINGS, FL 32708

DO NOT WRITE IN THIS SPACE



01072006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-2464232	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

DEVER, GARLAND E
1111 TUSKAWILLA RD
WINTER SPRINGS, FL 32708

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1.000000418949
02/14/06 60027-023 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEVER, GARLAND E 1111 TUSKAWILLA RD WINTER SPRINGS, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FRIEND, RONALD C 771 NIGHT OWL LANE WINTER SPRINGS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D UNGER, ANTONINA F 2771 CORINTH COURT ORLANDO, FL 32817
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FARLOW, JAMES 1111 TUSKAWILLA RD WINTER SPRINGS, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERGUSON, DENNIS 1111 TUSKAWILLA ROAD WINTER SPRINGS, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Ronald C Friend RONALD FRIEND 2/1/06 407-699-1424
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #