

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005936

FILED  
Jan 09, 2009  
Secretary of State

**Entity Name:** GRACE PRESBYTERIAN CHURCH, ASSOCIATE REFORMED SYNOD, INC.

**Current Principal Place of Business:**

DEVER, GARLAND E  
WINTER SPRINGS, FL 32708 US

**New Principal Place of Business:**

**Current Mailing Address:**

1111 TUSKAWILLA RD  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

**FEI Number:** 59-2464232

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DEVER, GARLAND E  
Address: 1111 TUSKAWILLA RD  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: T ( ) Delete  
Name: FRIEND, RONALD C  
Address: 771 NIGHT OWL LANE  
City-St-Zip: WINTER SPRINGS, FL

Title: D ( ) Delete  
Name: UNGER, ANTONINA F  
Address: 2771 CORINTH COURT  
City-St-Zip: ORLANDO, FL 32817

Title: D ( ) Delete  
Name: DEGROAT, RICHARD M  
Address: 1111 TUSKAWILLIA ROAD  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete  
Name: THORNE, DANIEL  
Address: 132 RIVERWOODS DRIVE  
City-St-Zip: CHULUOTA, FL 32766

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: D (X) Change ( ) Addition  
Name: SIMSON, ROBERT  
Address: 645 ASCOT CIRCLE  
City-St-Zip: ORLANDO, FL 32825

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

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: RONALD FRIEND

T

01/09/2009

Electronic Signature of Signing Officer or Director

Date