2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

15824 FAICHILLO DR

TAMPA, FL 33647

GRINNELL, LYNN D

PETERSON, W M

11440 JEFFERSON RD

THONOTOSASSA, FL

JOSEPH, CHARLES

TAMPA, FL 33647

27808 SANTA ANITA BLVD

WESLEY CHAPEL, FL 33544

9554 DEBBLE GLEW AVENUE

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Jun 10, 2008 8:00 am **Secretary of State DOCUMENT # N95000000020** 06-10-2008 90003 039 ****61.25 GRACE EPISCOPAL CHURCH OF TAMPA, INC. Principal Place of Business Mailing Address 15102 AMBERLY DR 15102 AMBERLY DR TAMPA, FL 33647 TAMPA, FL 33647 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 06052008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-3291466 City & State Applied For City & State Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TWINAMAAN, BENJAMIN B Street Address (P.O. Box Number is Not Acceptable) 15102 AMBERLY DR 👑 TAMPA, FL 33647 Zip Code City 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** (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 **\$5.00** May Be Florida Department of State Trust Fund Contribution Due by September 12, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. X Addition Delete TITLE TITLE ☐ Change Hark anderson NAME GRINNELL, LYNN D NAME 1006 woodaliff avenue 27808 SANTA ANITH BLVD STREET ADDRESS STREET ADDRESS WESLEY CHAPEL, FL 33544 CITY-ST-ZIP CITY-ST-ZIP Taupa, FL 33613 **X** Addition ☐ Change ■ Delete TITLE TITLE Robert Onderson 12328 Palk Street PATSKO, JCSEPH T NAMÉ NAME STREET ADDRESS 16113 CONDOVER COURT STREET ADDRESS **TAMPA, FL 33647** CITY-ST-ZIP CITY-ST-ZIP San Autonio, El ☐ Delete TITLE ☐ Addition TITLE Change JOHNSON, RODNEY NAME NAME

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Addition

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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.

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SIGNATURE: X SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OR DIRECTOR D