

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90213 024 ****61.25

DOCUMENT # N96000001111

1. Entity Name

PLACE OF GRACE COMMUNITY CHURCH, INC.

Principal Place of Business

Mailing Address

7209 N CHURCH AVE
TAMPA FL 33614

7209 N CHURCH AVE
TAMPA FL 33614

2. Principal Place of Business

7336 BROOKVIEW CIRCLE

3. Mailing Address

7336 BROOKVIEW CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA, FL

City & State

TAMPA, FL

4. FEI Number

59-3363873

Applied For

Not Applicable

Zip

33634

Country

USA

Zip

33634

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LOCKMAN, WILLIAM F SR
7209 N CHURCH AVE
TAMPA FL 33614

7. Name and Address of New Registered Agent

Name

JAMES A. HELLWIG

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

7336 BROOKVIEW CIRCLE

City

TAMPA

FL

Zip Code

33634

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

4/14/02

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

TITLE PD ☒ Delete
NAME LOCKMAN, WILLIAM F SR
STREET ADDRESS 7209 N CHURCH AVE
CITY-ST-ZIP TAMPA FL 33614

TITLE VD ☒ Delete
NAME LOCKMAN, LOVE N
STREET ADDRESS 7209 N CHURCH AVE
CITY-ST-ZIP TAMPA FL 33614

TITLE TD ☐ Delete
NAME HELLWIG, JIM
STREET ADDRESS 2336 BROOKVIEW CIRCLE
CITY-ST-ZIP TAMPA FL 33634

TITLE SD ☐ Delete
NAME KECK, JANET
STREET ADDRESS 15807 COTTONTAIL PLACE
CITY-ST-ZIP TAMPA FL 33624

TITLE D ☐ Delete
NAME DEBERNARDI, ANTHONY
STREET ADDRESS 1713 N ALEXANDER RD
CITY-ST-ZIP TAMPA FL 33603

TITLE D ☒ Delete
NAME BALBONTIN, S
STREET ADDRESS 5820 N CHURCH AVE
CITY-ST-ZIP TAMPA FL 33614

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME RICHARD DOIT
STREET ADDRESS 10707 CROWN GATE LANE
CITY-ST-ZIP TAMPA, FL 33624

TITLE ☐ Change ☒ Addition
NAME SUSAN TORMACNY
STREET ADDRESS P.O. BOX 25783
CITY-ST-ZIP TAMPA, FL 33623

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

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

TITLE ☐ Change ☐ Addition
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:

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

4/14/02 (813)886-4449

Date

Daytime Phone #

CR2E037 (9/01)