

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000003879

FILED
Jan 23, 2002 8:00 AM
Secretary of State

Entity Name: GRACE COMMUNITY CHURCH OF MANDARIN, INC.

Current Principal Place of Business:

P. O. BOX 24444
JACKSONVILLE, FL 322414444

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 24444
JACKSONVILLE, FL 322414444

New Mailing Address:

FEI Number: 59-3395847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRISTMAS, TROYE SCOTT
4104 NAKEMA DR S
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

CHRISTMAS, TROYE SCOTT
10266 TREVOR CREEK DRIVE W.
JACKSONVILLE, FL 32257 US

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: TROYE SCOTT CHRISTMAS

01/23/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CHRISTMAS, TROYE SCOTT
Address: 4104 NAKEMA DRIVE S
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: BECKWORTH, MARK S
Address: 8949 COUNTRY MILL LN
City-St-Zip: JACKSONVILLE, FL 32222

Title: D () Delete
Name: MONDAY, JOHN
Address: 151 MAYALL DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32220

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CHRISTMAS, TROYE SCOTT
Address: 10266 TREVOR CREEK DRIVE W
City-St-Zip: JACKSONVILLE, FL 32257

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARK S BECKWORTH

D

01/23/2002

Electronic Signature of Signing Officer or Director

Date