

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003879

FILED  
Jan 04, 2006  
Secretary of State

**Entity Name:** GRACE COMMUNITY CHURCH OF MANDARIN, INC.

**Current Principal Place of Business:**

10938 HOOD ROAD SOUTH  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

**Current Mailing Address:**

10938 HOOD ROAD SOUTH  
JACKSONVILLE, FL 32257

**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 S  
10266 TREVOR CREEK DRIVE W.  
JACKSONVILLE, FL 32257 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: CHRISTMAS, TROYE S  
Address: 10266 TREVOR CREEK DRIVE W  
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: ROWE, JOHN  
Address: 1954 MELROSE PLANTATION DRIVE  
City-St-Zip: JACKSONVILLE, FL 32223

**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:

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

D

01/04/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date