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FILED

Jan 15 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N96000005271 (9)

1. Corporation Name

GRACE CHRISTIAN CHURCH, INC.



Principal Place of Business

Mailing Address

234 N.W. 47TH AVENUE  
DEERFIELD BEACH FL 33442234 N.W. 47TH AVENUE  
DEERFIELD BEACH FL 33442-93193. Date Incorporated or Qualified  
10/11/19963a. Date of Last Report  
THIS IS FIRST ONE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

65-0710481

Applied For  
Not Applicable

22 City &amp; State

27 City &amp; State

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees

24

29

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, DON  
234 N.W. 47TH AVENUE  
DEERFIELD BEACH FL 33442

61 Name

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

63

64 City

FL

65 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PRESIDENT ☐ DELETE  
NAME DON SMITH  
STREET ADDRESS 234 N.W. 47 AVENUE  
CITY-ST-ZIP DEERFIELD BEACH, FL 334421.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIPTITLE TREASURER ☐ DELETE  
NAME JOHN STEFFAN  
STREET ADDRESS 1906 WILDWOOD LANE, N  
CITY-ST-ZIP DEERFIELD BEACH, FL 334422.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIPTITLE SECRETARY ☐ DELETE  
NAME JERRY BOGGESS  
STREET ADDRESS 5296 N.E. 19 AVENUE  
CITY-ST-ZIP POMPANO BEACH, FL 330643.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE TRUSTEE ☐ DELETE  
NAME MACK DOUGLAS  
STREET ADDRESS 1420 N. LAKE COURT  
CITY-ST-ZIP WEST PALM BEACH, FL 334064.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIPTITLE TRUSTEE ☐ DELETE  
NAME KEN ELDER  
STREET ADDRESS 10436 DORCHESTER DR.  
CITY-ST-ZIP BOCA RATON, FL 334285.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

JOHN STEFFAN, TREASURER

1/6/97

954-429-9443

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0042995

CR2E037 (9/96)