

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002748

FILED
May 13, 2009
Secretary of State

Entity Name: ABUNDANT GRACE COMMUNITY CHURCH, INC.

Current Principal Place of Business:

12505 NW 39TH AVE
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

12505 NW 39TH AVE
GAINESVILLE, FL 32606

New Mailing Address:

FEI Number: 59-3443840 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

COURSON, PHILLIP A REV
316 SW 42ND STREET
GAINESVILLE, FL 32607 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T/D () Delete
Name: BLAKEMORE, TIM
Address: 451 NW 58TH STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: S/D () Delete
Name: TAULBEE, DOUG
Address: 3835 SW 6TH PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: P/D () Delete
Name: COURSON, PHILLIP
Address: 316 SW 42ND STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: V/D () Delete
Name: GILLAND, J. MICHAEL
Address: 8103 SW 52ND LANE
City-St-Zip: GAINESVILLE, FL 32608

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: TIMOTHY E BLAKEMORE

T/D

05/13/2009

Electronic Signature of Signing Officer or Director

Date