

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P22934** (4)
1. Corporation Name
GRACE BRETHREN HOME MISSIONS COUNCIL, INC.

Principal Place of Business PO BOX 587 WINONA LAKE IN 46590	Mailing Address PO BOX 587 WINONA LAKE IN 46590
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3. Date Incorporated or Qualified

02/09/1989

4. FEI Number

35-0905946

Applied For
Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HALL, RALPH C.
5708 34TH COURT, WEST
BRADENTON FL 34209**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 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	
TITLE	<input type="checkbox"/> DELETE
NAME	D SHIPLEY, JAMES
STREET ADDRESS	803 ARBOR LANE
CITY-ST-ZIP	WINONA LAKE IN
TITLE	<input type="checkbox"/> DELETE
NAME	V CURTIS, MARK
STREET ADDRESS	2646 CALIFORNIA AVE
CITY-ST-ZIP	LONG BEACH CA
TITLE	<input type="checkbox"/> DELETE
NAME	S CHAMBERLAIN, LARRY N
STREET ADDRESS	108 APPLE CT
CITY-ST-ZIP	WINONA LAKE IN
TITLE	<input type="checkbox"/> DELETE
NAME	T MICHAEL, JERRY
STREET ADDRESS	ROUTE 4 - 105 MEADOW DR.
CITY-ST-ZIP	MARTINSBURG WV
TITLE	<input type="checkbox"/> DELETE
NAME	D HUESMANN, REV L
STREET ADDRESS	3510 WALNUT AVENUE
CITY-ST-ZIP	LONG BEACH FL
TITLE	<input type="checkbox"/> DELETE
NAME	P FETTERHOFF, ROBERT D.
STREET ADDRESS	912 DOUGLAS DRIVE
CITY-ST-ZIP	WOOSTER OH

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	VP
2.3 STREET ADDRESS	Curtis Mark
2.4 CITY-ST-ZIP	3646 California Ave. Long Beach, CA
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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:

[Signature] 3/17/98 219-267-5161

CR2E037 (10/97)