

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P33955

1. Entity Name

ASSOCIATION OF CHURCH MISSIONS COMMITTEES, INC.

Principal Place of Business

Mailing Address

4201 NORTH PEACHTREE ROAD
STE 300
ATLANTA GA 30341
US

4201 NORTH PEACHTREE ROAD
STE 300
ATLANTA GA 30341
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7444531

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEGRANDE, LARRY
13607 DORNOCH DR
ORLANDO FL 32828

Name

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

City

FL

Zip Code

8. 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

Larry Grande

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

(NOTE: Registered Agent signature required when reinstating)

4/2/02

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GROH, GREG
10316 N. FLANDERS CT.
MEQUON WI 53092-5211 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
NARRAMORE, KATHY
2426 SARANDI GRANDE
HACIENDA HEIGHTS CA 91745 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
PHILLIPS, WOODY
ACMC, INC. 116 PEACHTREE CT
FAYETTEVILLE GA 30215 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
SCHNEIDER, BOB
THE CHAPEL, 135 FIR HILL
AKRON OH 44304 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
SMITH, PHYLLIS
919 CONESTOGA RD, BLDG 1, #303
ROSEMONT PA 19010 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
CAMP, BRUCE
ACMC, INC. 116 PEACHTREE CT.
FAYETTEVILLE GA 30215 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John Bruce Hamilton TREASURER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/02

Date

(919) 309-4567

Daytime Phone #

CR2E037 (9/01)

0091952

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90103 015 ****61.25



DO NOT WRITE IN THIS SPACE