

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729108

**Entity Name:** GRACEPOINTE CHURCH OF THE NAZARENE, INC.

**Current Principal Place of Business:**

421 LONGWOOD LAKE MARY RD  
LAKE MARY, FL 32746

**Current Mailing Address:**

165 MIDDLE ST  
SUITE 1151  
LAKE MARY, FL 32746 US

**FEI Number:** 59-6560192

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

THOMAS, WAYNE  
165 MIDDLE ST  
SUITE 1151  
LAKE MARY, FL 32746 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

**Officer/Director Detail :**

Title T  
Name FOWLER, ELLSWORTH  
Address 165 MIDDLE ST  
SUITE 1151  
City-State-Zip: LAKE MARY FL 32746

Title P  
Name THOMAS, WAYNE  
Address 165 MIDDLE ST  
SUITE 1151  
City-State-Zip: LAKE MARY FL 32746

Title T  
Name WATSON, PAUL  
Address 165 MIDDLE ST  
SUITE 1151  
City-State-Zip: LAKE MARY FL 32746

Title ST  
Name AVILES, DYNA  
Address 165 MIDDLE ST  
SUITE 1151  
City-State-Zip: LAKE MARY FL 32746

*I hereby 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 all other like empowered.*

**SIGNATURE:** WAYNE THOMAS

**PRESIDENT**

**03/15/2016**

Electronic Signature of Signing Officer/Director Detail

Date