

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729108

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

**Current Principal Place of Business:**

2581 SANFORD AVE  
SANFORD, FL 32773-9581

**Current Mailing Address:**

2581 SANFORD AVE  
SANFORD, FL 32773-9581 US

**FEI Number:** 59-6560192

**Certificate of Status Desired:** No

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

THOMAS, WAYNE  
2581 SANFORD AVE  
SANFORD L, FL 32773 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 2581 S. SANFORD AVE  
City-State-Zip: SANFORD FL 32773-9581

Title P  
Name THOMAS, WAYNE  
Address 2581 S. SANFORD AVE  
City-State-Zip: SANFORD FL 32773-9581

Title T  
Name WATSON, PAUL  
Address 2581 SANFORD AVE  
City-State-Zip: SANFORD FL 32773-9581

Title ST  
Name AVILES, DYNA  
Address 2581 SANFORD AVE  
City-State-Zip: SANFORD FL 32773-9581

*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**

**03/10/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date