

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000008315

Entity Name: GRACE EVANGELICAL PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business:

700 S 9TH ST
LEESBURG, FL 34748

Current Mailing Address:

P.O. BOX 490001
LEESBURG, FL 34749 US

FEI Number: 46-0852300

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OGDEN, KRISTEN L.
700 S 9TH ST
LEESBURG, FL 34748 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: KRISTEN L. OGDEN

03/05/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HOCHHALTER, LARRY
Address P.O. BOX 490001
City-State-Zip: LEESBURG FL 34749

Title VD
Name POOL, LINDA
Address P.O. BOX 490001
City-State-Zip: LEESBURG FL 34749

Title TREASURER
Name HOFFMEYER, DAVID
Address P.O. BOX 490001
City-State-Zip: LEESBURG FL 34749

Title DIRECTOR
Name EDELMAN, THOMAS
Address P.O. BOX 490001
City-State-Zip: LEESBURG FL 34749

Title SECRETARY
Name OGDEN, KRISTEN L.
Address P.O. BOX 490001
City-State-Zip: LEESBURG FL 34749

Title DIRECTOR
Name SCHIELKE, ROBERT
Address P.O. BOX 490001
City-State-Zip: LEESBURG FL 34749

Title DIRECTOR
Name REED, SHELBY
Address P.O. BOX 490001
City-State-Zip: LEESBURG FL 34749

Title DIRECTOR
Name BYRNES, PATRICK
Address P.O. BOX 490001
City-State-Zip: LEESBURG FL 34749

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: KRISTEN L. OGDEN

RA

03/05/2020

Electronic Signature of Signing Officer/Director Detail

Date