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: TIMOTHY CAMPBELL

City-State-Zip: LAKELAND FL 33810

Electronic Signature of Signing Officer/Director Detail

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	E: SHAWN CAMIRE			12/15/2017	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	OFFICER	Title	PASTOR		
Name	CAMIRE, SHAWN P	Name	CAMPBELL, TIMOTHY P		
Address	2320 SLEEPY HILL RD	Address	2320 SLEEPY HILL RD		
City-State-Zip:	LAKELAND FL 33810	City-State-Zip:	LAKELAND FL 33810		
<b>T</b> :41 -					
Title	OFFICER				
Name	HINDER, JIM				
Address	2320 SLEEPY HILL RD				

## **Current Mailing Address:**

2320 SLEEPY HILL RD

## FEI Number: 59-3095606

### Name and Address of Current Registered Agent:

CAMIRE, SHAWN P

# DOCUMENT# N49124

Entity Name: GRACE CHURCH OF LAKELAND, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

## **Current Principal Place of Business:**

2320 SLEEPY HILL RD LAKELAND, FL 33810

LAKELAND, FL 33810

6103 YATES RD LAKELAND, FL 33811 US

FILED Dec 15, 2017 Secretary of State CR0601361505

Certificate of Status Desired: Yes

PASTOR

Date