2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# 749907

Entity Name: GRACE FELLOWSHIP OF BREVARD, INC.

Current Principal Place of Business:

3420 MURRELL ROAD
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

3420 MURRELL ROAD
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 59-2470805 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RHODES, DAVID
983 PELICAN LANE
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: BLOMSTER, THOMAS R
Address: 1071 EGRET LAKE WAY
City-St-Zip: VIERA, FL 32940

Title: D ( ) Delete
Name: MANSUR, JOHN
Address: 4195 SPARROW HAWK RD
City-St-Zip: MELBOURNE, FL

Title: T ( ) Delete
Name: LOVAN, MIKE
Address: 1179 LUGHER DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: D ( ) Delete
Name: ELAM, TIM
Address: 1017 ORANGE WOODS BLVD
City-St-Zip: ROCKLEDGE, FL 32955

Title: D (X) Delete
Name: KERSTETTER, KEN
Address: 887 WESTPORT DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS R BLOMSTER S 04/30/2006
Electronic Signature of Signing Officer or Director — Date