

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24006

FILED
Jul 12, 2004
Secretary of State**Entity Name:** BARBARA & GRACE, INC.**Current Principal Place of Business:**1733 PEARL ST. N.
JACKSONVILLE, FL 32206 US**New Principal Place of Business:****Current Mailing Address:**1147 W 21ST STREET
JACKSONVILLE, FL 32209 US**New Mailing Address:**2781 TREASURE COVE LANE
JACKSONVILLE, FL 32224 US**FEI Number:** 59-2954006**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BAER, VAUGHN
1147 W 21ST STREET
JACKSONVILLE, FL 32209 US**Name and Address of New Registered Agent:**BRIGMAN, JULIE
2781 TREASURE COVE LANE
JACKSONVILLE, FL 32224 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: JULIE BRIGMAN

07/12/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: BRIGMAN, JULIE M
Address: 2781 TREASURE COVE LANE
City-St-Zip: JACKSONVILLE, FL 32224

Title: VD (X) Delete
Name: WATSON, ELMER
Address: 1423 SAN MARCO
City-St-Zip: JACKSONVILLE, FL 32207

Title: PD (X) Delete
Name: BAER, VAUGHN
Address: 1147 W 21ST ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: TD () Delete
Name: DEVALL, GLORIA
Address: 343 WEST 7TH ST
City-St-Zip: JACKSONVILLE, FL 32206

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: PD (X) Change () Addition
Name: DEVALL, GLORIA
Address: 343 WEST 7TH ST
City-St-Zip: JACKSONVILLE, FL 32206

Title: TD () Change (X) Addition
Name: MAKOWSKI, JOE
Address: 1843 PEARL STREET NORTH
City-St-Zip: JACKSONVILLE, FL 32206

Title: D () Change (X) Addition
Name: BOXRUD, STEVEN
Address: 2477 SAN PABLO ROAD NORTH
City-St-Zip: JACKSONVILLE, FL 32224

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JULIE BRIGMAN

SD

07/12/2004

Electronic Signature of Signing Officer or Director

Date