

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37956

FILED  
Jan 22, 2009  
Secretary of State

Entity Name: GRAD SERVICES, INC.

**Current Principal Place of Business:**

18 MARINA DRIVE  
LABELLE, FL 33935 US

**New Principal Place of Business:**

1104 RIVER RUN  
LABELLE, FL 33935 US

**Current Mailing Address:**

P.O. BOX 1577  
LABELLE, FL 33935

**New Mailing Address:**

FEI Number: 59-3003507

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAPECE, JOHN  
18 MARINA DRIVE  
LABELLE, FL 33935 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: DVT ( ) Delete  
Name: CAPECE, JOHN C  
Address: 18 MARINA DRIVE  
City-St-Zip: LABELLE, FL 33935

Title: DP ( ) Delete  
Name: GLOVER, CAROLE  
Address: 837 WALKER RD  
City-St-Zip: GREAT FALLS, VA

Title: D ( ) Delete  
Name: FIDLER, MICHAL  
Address: 132 NORTH LER ST  
City-St-Zip: LABELLE, FL 33935

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DVT (X) Change ( ) Addition  
Name: CAPECE, JOHN C  
Address: 1104 RIVER RUN  
City-St-Zip: LABELLE, FL 33935

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 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: JOHN C. CAPECE

DVT

01/22/2009

Electronic Signature of Signing Officer or Director

Date