

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000003655

**FILED**  
**Mar 18, 2023**  
**Secretary of State**  
**1008329428CC**

**Entity Name:** GRACE COMMUNITY DEVELOPMENT CORPORATION INTERNATIONAL, INC.

**Current Principal Place of Business:**

2201 NW 93RD AVENUE  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

2201 NW 93RD AVENUE  
PEMBROKE PINES, FL 33024 US

**FEI Number: 85-0627052**

**Certificate of Status Desired: No**

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

HARRIGAN, LUCDEL L MR  
2201 NW 93RD AVENUE  
PEMBROKE PINES, FL 33024 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CHAI  
Name HARRIGAN, LUCDEL L  
Address 2201 NW 93RD AVENUE  
City-State-Zip: PEMBROKE PINES FL 33024

Title T,D  
Name HARRIGAN, GASTRIDE  
Address 2201 NW 93RD AVENUE  
City-State-Zip: PEMBROKE PINES FL 33024

Title TR/D  
Name NOEL, WOODSIDE  
Address 8120 NW 17TH MANOR  
City-State-Zip: PLANTATION FL 33322

Title P, C  
Name HARRIGAN, LUCDEL L  
Address 2201 NW 93RD AVENUE  
City-State-Zip: PEMBROKE PINES FL 33024

Title CO,S  
Name HARRIGAN, GASTRIDE L  
Address 2201 NW 93RD AVENUE  
City-State-Zip: PEMBROKE PINES FL 33024

*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: HARRIGAN,LUCDEL

EXECUTIVE DIRECTOR

03/18/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date