

2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000000343

Entity Name: THE GERACE RESEARCH CENTRE LIMITED INC.**Current Principal Place of Business:**GRAHAMS HARBOUR
SAN SALVADOR ISLAND,**Current Mailing Address:**3616 PEACE RIVER DRIVE
PUNTA GORDA, FL 33983 US**FEI Number:** 98-0367266**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GERACE, KATHY D
3616 PEACE RIVER DRIVE
PUNTA GORDA, FL 33983 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 C
Name BETHEL, NICOLETTE DR
Address UNIVERSITY OF THE BAHAMAS
DIVISION OF HUMANITIES & SOCIAL
SCIENCES
City-State-Zip: NASSAU

Title D
Name DAVIS, LINDA DR
Address UNIVERSITY OF THE BAHAMAS
City-State-Zip: NASSAU

Title P
Name DEXTER, TROY DR
Address GRAHAMS HARBOUR
City-State-Zip: SAN SALVADOR ISLAND

Title T
Name KNOWLES, VELDA
Address UNITED STATES
City-State-Zip: SAN SALVADOR ISLAND

Title VC
Name STUBBS, KAYLA DR
Address UNIVERSITY OF THE BAHAMAS
DIVISION OF NATURAL SCIENCES
City-State-Zip: NASSAU

Title D
Name GERACE, KATHY D
Address 3616 PEACE RIVER DRIVE
City-State-Zip: PUNTA GORDA FL 33983

Title S
Name HANNA, ROCHELLE
Address N. VICTORIA HILL
City-State-Zip: SAN SALVADOR ISLAND

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: KATHY D. GERACE**DIRECTOR****02/21/2018**

Electronic Signature of Signing Officer/Director Detail

Date