2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# 137404

Entity Name: GRACEWOOD, INCORPORATED

Current Principal Place of Business:

21 ROYAL PALM POINTE
STE 201
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 370
VERO BEACH, FL 32961

New Mailing Address:

FEI Number: 59-0604109 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUTHER, JOHN M
21 ROYAL PALM POINTE
SUITE 201
VERO BEACH, FL 32960 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	CD	( ) Delete
Name:	RICHARDSON, DANFORTH K.	
Address:	1035 ST.JAMES CIR	
City-St-Zip:	VERO BEACH, FL 32967	
Title:	D	( ) Delete
Name:	RICHARDSON, MARJORIE H	
Address:	1035 ST. JAMES CIR	
City-St-Zip:	VERO BEACH, FL 32967	
Title:	PD	( ) Delete
Name:	LUTHER, JOHN M.	
Address:	555 SOUTH A1A	
City-St-Zip:	VERO BEACH, FL 32963	
Title:	VD	( ) Delete
Name:	KAHLE, GEORGE A.	
Address:	6020 SW 5TH ST.	
City-St-Zip:	VERO BEACH, FL 32968	
Title:	AS	( ) Delete
Name:	NEWMAN, PAUL A	
Address:	21 ROYAL PALM POINTE STE 201	
City-St-Zip:	VERO BEACH, FL 32960	
Title:	ST	( ) Delete
Name:	PEREZ, TOMAS RENE	
Address:	2019 CORTEZ AVENUE	
City-St-Zip:	VERO BEACH, FL 32960	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	ATD	(X) Change ( ) Addition
Name:	HOPKINS, SUSAN R	
Address:	220 ESTUARY DRIVE	
City-St-Zip:	VERO BEACH, FL 32963	
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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOMAS RENE PEREZ ST 03/25/2009

Electronic Signature of Signing Officer or Director — Date