2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007
Secretary of State

DOCUMENT# 654421

Entity Name: GRACE'S CENTER, INC.

Current Principal Place of Business:

C/O DOMENIC L. GROSSO, ESQ.
3850 NW BOCA RATON BLVD., STE. 4
BOCA RATON, FL 33431

New Principal Place of Business:

1949 N.W. BOCA RATON BLVD.
BOCA RATON, FL 33432

Current Mailing Address:

C/O DOMENIC L. GROSSO, ESQ.
3850 NW BOCA RATON BLVD., STE. 4
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 59-1966564 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GROSSO, DOMENIC L ESQ.
3850 NW BOCA RATON BLVD., STE. 4
BOCA RATON, FL 33431 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: P ( ) Delete
Name: GROSSO, DOMENIC L
Address: 20825 CIPRES WAY
City-St-Zip: BOCA RATON, FL 33433

Title: V ( ) Delete
Name: KERR, SUSAN M
Address: 343 PINE CIRCLE
City-St-Zip: BOCA RATON, FL 33432

Title: S ( ) Delete
Name: DEVINE, JOANNE
Address: 425 NE 12TH ST.
City-St-Zip: BOCA RATON, FL 33432

Title: T ( ) Delete
Name: GROSSO, GRACE
Address: 1235 NE 4 CT
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete
Name: GROSSO, JENIFFER A
Address: 4. S.W. 11TH ST.
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D ( ) Delete
Name: LEONARD, ALYSSA K
Address: 4710 NW 3RD AVE.
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change ( ) Addition
Name: BRADY, SUSAN M
Address: 343 PINE CIRCLE
City-St-Zip: BOCA RATON, FL 33432

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 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: DOMENIC L. GROSSO PRES 01/19/2007
Electronic Signature of Signing Officer or Director Date