

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 654421

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: GRACE'S CENTER, INC.

## Current Principal Place of Business:

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

## New Principal Place of Business:

## 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: BRADY, 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:      ( ) 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:

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: DOMENIC L. GROSSO

P/D

01/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date