2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2006
Secretary of State

DOCUMENT# 712113

Entity Name: GRACE CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

1185 N. WYMORE RD.
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

1185 N. WYMORE RD.
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 59-2124090 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DRAGOMIR, WILLIAM N
1020 SHEELER AVENUE
APOPKA, FL 32703 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

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	NEST, JOHN	
Address:	235 LAKE SEMINARY CIRCLE	
City-St-Zip:	MAITLAND, FL 32751	
Title:	DT	( ) Delete
Name:	DRAGOMIR, WILLIAM	
Address:	1020 SHEFLER AVE	
City-St-Zip:	APOPKA, FL 32703	
Title:	D	( ) Delete
Name:	BERKLAND, MARK	
Address:	369 BANYON DR.	
City-St-Zip:	MAITLAND, FL 32751	
Title:	P	( ) Delete
Name:	SMITH, BILL	
Address:	1185 N. WYMORE RD	
City-St-Zip:	MAITLAND, FL 32751	

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:	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN NEST D 07/11/2006

Electronic Signature of Signing Officer or Director — Date