2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#741019

FILED Aug 26, 2009 Secretary of State

Entity Name: CHURCH OF GRACE, INC.

	rincipal Place of Business:	New Principal Place of Business:	
	HIGHWAY C 25 EW, FL 34421 US		
urrent N	failing Address:	New Mailing Address:	
O BOX ELLEVIE	1112 EW, FL 32620 US		
accordar	nce with s. 607.193(2)(b), F.S., the corporation did not rece	•	
ame and	d Address of Current Registered Agent:	Name and Address of New Registered Agent	:
946 SE 1	DUGH, LAMAR 35TH ST FIELD, FL 34491 US		
	e named entity submits this statement for the purpore of Florida.	se of changing its registered office or registered agen	t, or both
GNATU			
	Electronic Signature of Registered Agent	Date	
FFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND D	IRECTO
e:	V () Delete	Title: () Change () Addition	
me: dress:	MCCULLOUGH, DANNY 6964 S. E 135 ST SUMMERFIELD, FL	Name: Address: City-St-Zip:	
me: dress: y-St-Zip: e: me: dress:	6964 S. E 135 ST	Address:	
me: dress: y-St-Zip: e: me: dress: y-St-Zip: e: me: dress:	6964 S. E 135 ST SUMMERFIELD, FL T () Delete HERNANDEZ, JOSE REV. 10032 SE 155TH STREET	Address: City-St-Zip: Title: () Change () Addition Name: Address:	
me: dress: y-St-Zip: e: me: dress: y-St-Zip: e: me: dress: y-St-Zip: e: me: dress:	6964 S. E 135 ST SUMMERFIELD, FL T () Delete HERNANDEZ, JOSE REV. 10032 SE 155TH STREET SUMMERFIELD, FL 34421 P () Delete MCCULLOUGH, LAMAR 6946 SE 135TH ST	Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:	
me: dress: y-St-Zip: e: me: dress: y-St-Zip: e: me: dress: y-St-Zip: e: me: dress: y-St-Zip: e: me: dress: y-St-Zip:	6964 S. E 135 ST SUMMERFIELD, FL T () Delete HERNANDEZ, JOSE REV. 10032 SE 155TH STREET SUMMERFIELD, FL 34421 P () Delete MCCULLOUGH, LAMAR 6946 SE 135TH ST SUMMERFIELD, FL 34491 T () Delete HOLIDAY, LES 6944 S.E. 135TH ST.	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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAMAR MCCULLOUGH REV. 08/26/2009