

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000078514

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** GRACE ACCOUNTANCY GROUP, LLC

**Current Principal Place of Business:**

600 GOODLETTE RD., N  
#104  
NAPLES, FL 34102 US

**New Principal Place of Business:**

**Current Mailing Address:**

600 GOODLETTE RD., N  
#104  
NAPLES, FL 34102 US

**New Mailing Address:**

**FEI Number:** 26-0775779

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRACE, ROBERT E  
13450 PARKER COMMONS BLVD  
#103  
FORT MYERS, FL 33912 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GRACE, ROBERT E  
Address: 13450 PARKER COMMONS BLVD #103  
City-St-Zip: FORT MYERS, FL 33912 US

Title: MGRM  
Name: DEMPSTER, DALE S  
Address: 600 GOODLETTE RD., N, #104  
City-St-Zip: NAPLES, FL 34102

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DALE S DEMPSTER

MGRM

04/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date