

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002163

FILED
Feb 27, 2005
Secretary of State

Entity Name: GRACE IN ACTION MISSION, INC.

Current Principal Place of Business:

25436 GEDDY DRIVE
LAND O LAKES, FL 346395669

New Principal Place of Business:

Current Mailing Address:

25436 GEDDY DRIVE
LAND O LAKES, FL 346395669

New Mailing Address:

FEI Number: 65-1093256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKENZIE, KERRY A. SR.
110 WEST ALVA STREET
TAMPA, FL 336033614 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: BYNZAR, VASILYI
Address: 25436 GEDDY DRIVE
City-St-Zip: LAND O LAKES, FL 346395669

Title: D () Delete
Name: BYNZAR, OLEG
Address: 25436 GEDDY DRIVE
City-St-Zip: LAND O LAKES, FL 346395669

Title: D () Delete
Name: PETRILA, LUCICA
Address: 1310 JOHNSON STREET
City-St-Zip: HOLLYWOOD, FL 33019

Title: D () Delete
Name: MCKENZIE, KERRY A. SR.
Address: 110 WEST ALVA STREET
City-St-Zip: TAMPA, FL 336033614

Title: D () Delete
Name: THOMAS-MCKENZIE, TIFFANY
Address: 12108 N. 56TH STREET, SUITE 4
City-St-Zip: TAMPA, FL 33617

Title: D () Delete
Name: HORTON, DENNIS
Address: 905 HOLLYSHORE DRIVE
City-St-Zip: LUTZ, FL 335485029

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: D (X) Change () Addition
Name: BULGARU, VALERIY
Address: 1700 TUCKER RD
City-St-Zip: RIVERVIEW, FL 33569

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: OLEG BYNZAR

D

02/27/2005

Electronic Signature of Signing Officer or Director

Date