

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002433

FILED
Feb 28, 2005
Secretary of State

Entity Name: SOUTHERN GRACE MINISTRIES, INC.

Current Principal Place of Business:

2835 WILLOW WOOD DRIVE
MULBERRY, FL 33860

New Principal Place of Business:

Current Mailing Address:

P O BOX 1235
MULBERRY, FL 33860

New Mailing Address:

FEI Number: 59-3711544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENTON, RONALD W
2835 WILLOW WOOD DRIVE
MULBERRY, FL 33860 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: PD () Delete
Name: BENTON, RONALD W
Address: 2835 WILLOW WOOD DRIVE
City-St-Zip: MULBERRY, FL 33860

Title: TD () Delete
Name: PAXTON, STAN
Address: 2179 EL CAMPO AVE
City-St-Zip: DELTONA, FL 32738

Title: V () Delete
Name: TRISSEL, DEBORAH M
Address: 487 NE 76TH WAY
City-St-Zip: WILDWOOD, FL 34785

Title: SD () Delete
Name: BENTON, TWILA M
Address: 2835 WILLOW WOOD DR
City-St-Zip: MULBERRY, FL 33860

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 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: BENTON

PD

02/28/2005

Electronic Signature of Signing Officer or Director

Date