

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005161

Entity Name: STROKE OF GRACE, INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

5530 HARBOR DR
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

5530 HARBOR DR
LAKELAND, FL 33809

New Mailing Address:

FEI Number: 59-3731216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURROUGHS, ELNORA
5530 HARBOR DRIVE EAST
LAKELAND, FL 33809 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: BURROUGHS, ELNORA
Address: 5530 HARBOR DR
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: FORTSON, JEREMIAH
Address: 2006 MARTIN LUTHER KING AVE
City-St-Zip: LAKELAND, FL 33805

Title: D () Delete
Name: FORTSON, PRINCESS
Address: 2006 MARTIN LUTHER KING AVE
City-St-Zip: LAKELAND, FL 33805

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:

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: ELNORA BURROUGHS

D

04/30/2004

Electronic Signature of Signing Officer or Director

Date