

**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Apr 18, 2005 8:00 am  
Secretary of State**

03-24-2005 90028 013 \*\*\*150.00

**DOCUMENT # N01000007751**

**1. Entity Name  
MINUTE OF GRACE, INC.**



**Principal Place of Business  
96 GARNET  
DESTIN, FL 32541**

**Mailing Address  
96 GARNET  
DESTIN, FL 32541**

**66010836**



01192005 No Chg-NP CR2E037 (10/03)

**4. FEI Number  
27-0007292**

**Applied For  
Not Applicable**

**5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**RATZLAFF, GEORGE  
96 GARNET  
DESTIN, FL 32541**

**DO NOT WRITE  
IN THIS SPACE**

**8. 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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2005**

**9. Election Campaign Financing  
Trust Fund Contribution. ☐**

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
OP  
RATZLAFF, GEORGE  
96 GARNET  
DESTIN, FL 32541**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DST  
RATZLAFF, GAIL L  
96 GARNET  
DESTIN, FL 32541**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
D'AUBIN, LEO  
10641 HILLARY COURT #2  
BATON ROUGE, LA 70810**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

**DO NOT WRITE  
IN THIS SPACE**

**12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

*George Ratzlaff*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-15-05 85073760582**

Date

Daytime Phone #