

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004696

FILED
Apr 09, 2012
Secretary of State

Entity Name: HOUSE OF GRACE OF BAY COUNTY, INC.

Current Principal Place of Business:

701 EAST HWY 90
LOT #11
BONIFAY, FL 32425

New Principal Place of Business:

1015 S. WEEKS ST.
BONIFAY, FL 32425

Current Mailing Address:

P. O. BOX 883
BONIFAY, FL 32425

New Mailing Address:

FEI Number: 52-2394027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, ROBERT
1015 SOUTH WEEKS ST.
BONIFAY, FL 32425 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
Name: SMITH, ROBERT
Address: P.O.BOX 883
City-St-Zip: BONIFAY, FL 32425

Title: T
Name: HAITHCOAT, FRAN
Address: 2800 UNION HILL CHURCH ROAD
City-St-Zip: BONIFAY, FL 32425

Title: S
Name: METHENEY, ELIZABETH
Address: 501 W. MICHIGAN AVE
City-St-Zip: BONIFAY, FL 32425

Title: S
Name: BURKHEAD, DOLLY
Address: 2319 CATTLE DR.
City-St-Zip: BONIFAY, FL 32425

Title: S
Name: BURKHEAD, GARY
Address: 2319 CATTLE DR.
City-St-Zip: BONIFAY, FL 32425

I hereby 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 all other like empowered.

SIGNATURE: ROBERT SMITH

D

04/09/2012

Electronic Signature of Signing Officer or Director

Date