2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007987

Entity Name: GRACE HARBOR MINISTRIES, INC.

FILED Jan 16, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
2850 E BAYA AVE LAKE CITY, FL 32024				1686 S. E. BAYA DRIVE SUITE 101 LAKE CITY, FL 32024	
Current Mailing Address:				New Mailing Address:	
1295 N.W. ASHLEY STREET LAKE CITY, FL 32055			1295 N.W. ASHLEY ST. LAKE CITY, FL 32055		
FEI Number:	01-0586274	FEI Number Applied For ()	FEI Num	nber Not Applicable ()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent: Name				Name and Address of N	lew Registered Agent:
JOHNS, DAWN 1295 N.W. ASHLEY STREET LAKE CITY, FL 32055 US			JOHNS, DAWN L PASTOR 1295 N.W. ASHLEY STREET LAKE CITY, FL 32055 US		
The above in the State		ubmits this statement for the pur	rpose of	f changing its registered o	ffice or registered agent, or both,
SIGNATURE: DAWN L. JOHNS				01/16/2006	
	Electroni	c Signature of Registered Agen	t		Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D VP () JOHNS, DONALI 1295 N.W. ASHL LAKE CITY, FL	LEY STREET		Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	D P () JOHNS, DAWN 1295 N.W. ASHL LAKE CITY, FL			Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	D () NASH, ROBERT ROUTE 17 BOX LAKE CITY, FL			Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	D T () JOHNS, SARAH 1210 NW DALIA LAKE CITY, FL			Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	D () NASH, DARLENE RT 17 BOX 953 LAKE CITY, FL			Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	D () JOHNS, TED 1210 NW DALIA LAKE CITY, FL			Title: () Name: Address: City-St-Zip:	Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DAWN L. JOHNS DP 01/16/2006