## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000001429

FILED Mar 08, 2009 Secretary of State

Entity Name: GRACE WORKS MINISTRIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 153 SEVILLA AVE ROYAL PALM BEACH, FL 33411 **Current Mailing Address: New Mailing Address:** 153 SEVILLA AVE ROYAL PALM BEACH, FL 33411 FEI Number: 22-3895069 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: IACCARINO, MATTHEW J 153 SEVILLA AVE ROYAL PALM BEACH, FL 33411 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete IACCARINO, MATTHEW J Name: Name: 153 SEVILLA AVE Address: Address: City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: Title: ( ) Delete Title: () Change () Addition BLAKE, DAN Name: Name: Address: 1626 SHAKER CIR Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: Title: () Delete Title: () Change () Addition HERNANDEZ, ANNETTE Name: Name: Address: 12416 KEY LIME BLVD Address: City-St-Zip: WEST PALM BEACH, FL 33412 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition IACCARINO, MATTHEW A Name: Name: RILEY, BRUCE Address: 8422 CARGILL PT Address: 13170 69TH ST N. City-St-Zip: W PALM BEACH, FL 33411 City-St-Zip: ROYAL PALM BEACH, FL 33411 Title: () Delete Title: () Change () Addition IACCARINO, LORELEI E Name: Name: 153 SEVILLA AVE Address: Address: City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition RILEY, BRUCE RILEY, ALICE Name: Name: Address: 13170 69TH ST N Address: 13170 69TH ST N ROYAL PALM BEACH, FL 33411 ROYAL PALM BEACH, FL 33411 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MATTHEW J IACCARINO P 03/08/2009