

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006607

FILED
Jan 14, 2006
Secretary of State

Entity Name: INTERNATIONAL GRACE MINISTRIES, INC.

Current Principal Place of Business:

453 BRIDGE CREEK BLVD.
OCOOE, FL 34761 US

New Principal Place of Business:

Current Mailing Address:

453 BRIDGE CREEK BLVD.
OCOOE, FL 34761 US

New Mailing Address:

FEI Number: 30-0197502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ITTY, PLAVUNKAL M REV.
453 BRIDGE CREEK BLVD.
OCOOE, FL 34761 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: MD () Delete
Name: ITTY, PLAVUNKAL M REV.
Address: 453 BRIDGE CREEK BLVD.
City-St-Zip: OCOOE, FL 34761 US

Title: D () Delete
Name: ITTY, ANNAMMA MRS.
Address: 453 BRIDGE CREEK BLVD.
City-St-Zip: OCOOE, FL 34761 US

Title: D () Delete
Name: ITTY, NOBY MR.
Address: 453 BRIDGE CREEK BLVD.
City-St-Zip: OCOOE, FL 34761 US

Title: D () Delete
Name: ALEXANDER, THOMAS MR.
Address: 5212 CYPRESS CREEK DR.
City-St-Zip: ORLANDO, FL 32811 US

Title: D () Delete
Name: ALEXANDER, SUSAN MRS.
Address: 5212 CYPRESS CREEK DR.
City-St-Zip: ORLANDO, FL 32811 US

Title: D () Delete
Name: KURUVILLA, JOHNY MR.
Address: 7108 CANTRELL CT.
City-St-Zip: ORLANDO, FL 32835 US

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:

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 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: THOMAS ALEXANDER

D

01/14/2006

Electronic Signature of Signing Officer or Director

Date