

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000011113

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: A TOUCH OF HIS GRACE, INC.

## Current Principal Place of Business:

10280 N. PALAFOX ST.  
PENSACOLA, FL 32534

## New Principal Place of Business:

9515 HOLSBERRY RD  
C  
PENSACOLA, FL 32534

## Current Mailing Address:

10280 N. PALAFOX ST.  
PENSACOLA, FL 32534

## New Mailing Address:

835 CANDY LANE  
CANTONMENT, FL 32533

FEI Number: 90-0132148

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONTGOMERY, TINA G  
835 CANDY LANE  
CANTONMENT, FL 32533 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: DPS ( ) Delete  
Name: MONTGOMERY, TINA G  
Address: 835 CANDY LANE  
City-St-Zip: CANTONMENT, FL 32533

Title: DT ( ) Delete  
Name: DANLEY, DONNA  
Address: 2112 POMPANO RD.  
City-St-Zip: CANTONMENT, FL 32533

Title: DV (X) Delete  
Name: SPANN, JOANN  
Address: 3621 SCHIFKO RD.  
City-St-Zip: CANTONMENT, FL 32533

## 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:

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: TINA G MONTGOMERY

DPS

04/29/2009

Electronic Signature of Signing Officer or Director

Date