## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000007321

FILED Apr 22, 2007 Secretary of State

Entity Name: THE STRAIGHT WAY OF GRACE MINISTRY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 312 W MIAMI AVE VENICE, FL 34285 **Current Mailing Address: New Mailing Address:** 312 W MIAMI AVE VENICE, FL 34285 FEI Number: 65-1231182 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: DAKDOK, USAMA ALBERT, GLENN C 312 W MIAMI AVE 813 CINĆY ST VENICE, FL 34285 VENICE, FL 34285 US 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: GLENN C. ALBERT 04/22/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PD () Delete () Change () Addition DAKDOK, USAMA Name: Name: 312 W MIAMI AVE Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: VD ( ) Delete Title: () Change () Addition DAKDOK, VICKY Name: Name: Address: 312 W MIAMI AVE Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: () Delete Title: TDT (X) Change ( ) Addition ALBERT, GLENN C ALBERT, GLENN C Name: Name: Address: 813 CINCY ST Address: 813 CINCY ST City-St-Zip: VENICE, FL 34285 City-St-Zip: VENICE, FL 34285 Title: SD ( ) Delete Title: (X) Change ( ) Addition BARNETT, WILLIAM H Name: Name: YODER, RANDY 841 WATERSIDE #102 Address: Address: 821 AZURE RD City-St-Zip: VENICE, FL 34285 City-St-Zip: VENICE, FL 34293 Title: DT () Delete Title: () Change () Addition HODGE, THOMAS Name: Name: 229 HARBOR DR Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition WOOD, JAMES REESE, GAR Name: Name: Address: 1430 DONA WAY Address: 421 PEPPERTREE RD VENICE, FL 34293 NOKOMIS, FL 34275 City-St-Zip: 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: GLENN C. ALBERT TDT 04/22/2007