2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2009
Secretary of State

DOCUMENT# N06000001467

Entity Name: ACTION BY GRACE INC.

Current Principal Place of Business:

371 TORTUGA WAY
MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

P.O BOX 121716 - 1716
MELBOURNE, FL 32912

New Mailing Address:

FEI Number: 02-0767857 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SAINTELUS, GARY
371 TORTUGA WAY
MELBOURNE, FL 32904 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: PD ( ) Delete
Name: SAINTELUS, GARY
Address: 371 TORTUGA WAY
City-St-Zip: MELBOURNE, FL 32904

Title: A/S ( ) Delete
Name: METAYER, ALIX
Address: 1008HUBBEL RD
City-St-Zip: BRADENTON, FL 34208

Title: A/S ( ) Delete
Name: SAINTELUS, ELIZA
Address: 371TORTUGA WAY
City-St-Zip: MELBOURNE, FL 32904

Title: T ( ) Delete
Name: SAINTELUS, ELIZA
Address: 371 TORTUGA WAY
City-St-Zip: MELBOURNE, FL 32904

Title: V ( ) Delete
Name: ISMA, ANTOIN
Address: 801 N.E. 163 STREET
City-St-Zip: MIAMI, FL 33162

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:

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: GARY SAINTELUS PD 07/08/2009
Electronic Signature of Signing Officer or Director — Date