

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002475

FILED
Apr 06, 2009
Secretary of State

Entity Name: GARDEN OF GRACE MINISTRIES, INC.

Current Principal Place of Business:

10712 BAMBOO ROD CIRCLE
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

10712 BAMBOO ROD CIRCLE
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 20-5679300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMBERT, JUDITH S
673 WEST LUMSDEN ROAD
BRANDON, FL 33511 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: D () Delete
Name: FONTAINE PHILBERT, NORMA L
Address: 10712 BAMBOO ROD CIRCLE
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: PHILBERT, FRANCIS P
Address: 10712 BAMBOO ROD CIRCLE
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: CLARKE PETERS, PATSY
Address: 55 JOHN STREET
City-St-Zip: METUCHEN, FL 08840

Title: D () Delete
Name: VAN DEVAN, MAJORIE
Address: 607 COOPER BEECH BOULEVARD
City-St-Zip: DELTONA, FL 32725

Title: D () Delete
Name: PETERS, PATSY C
Address: 55 JOHN STREET
City-St-Zip: METUCHEN, FL 08840

Title: D () Delete
Name: FRANCIS, VINCIA
Address: 6203 DUCK KEY COURT
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FONTAINE PHILBERT, NORMA L
Address: 10712 BAMBOO ROD CIRCLE
City-St-Zip: RIVERVIEW, FL 33569

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PHILBERT, ANDREW S
Address: 10712 BAMBOO ROD CIRCLE
City-St-Zip: RIVERVIEW, FL 33569

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: NORMA FONTAINE-PHILBERT

P

04/06/2009

Electronic Signature of Signing Officer or Director

Date