2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 20, 2008
Secretary of State

DOCUMENT# N06000012711

Entity Name: HOLY CHURCH OF GRACE, INC.

Current Principal Place of Business:

1233 45TH STREET
SUITE B
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

PO BOX 211345
ROYAL PALM BEACH, FL 33421

New Mailing Address:

FEI Number: 42-1719046 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

LAMOUR, FRANTZ
1365 THORNRIDGE LANE
ROYAL PALM BEACH, FL 33411 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: P ( ) Delete
Name: LAMOUR, FRANTZ
Address: 1365 THORNRIDGE LANE
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: VP ( ) Delete
Name: MESADIEU, SONEL
Address: 6717 3RD STREET
City-St-Zip: JUPITER, FL 33458 US

Title: C ( ) Delete
Name: DILUS, ANTONIO COUNSE
Address: 9236 SUNRISE DRIVE # S
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: T ( ) Delete
Name: LAMOUR, DJENNY
Address: 1365 THORNRIDGE LANE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: S ( ) Delete
Name: MESADIEU, FRANGIA
Address: 6717 3RD STREET
City-St-Zip: JUPITER, FL 334058

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: FRANTZ LAMOUR P 09/20/2008

Electronic Signature of Signing Officer or Director — Date