

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002726

FILED
Apr 24, 2008
Secretary of State

Entity Name: G.R.A.C.E. HOUSING TRUST, INC.

Current Principal Place of Business:

703 NE 1ST STREET
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

703 NE 1ST STREET
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCINTOSH, NANCY J
306 NW 180TH STREET
NEWBERRY, FL 32669 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: MCINTOSH, NANCY J
Address: 306 NW 180TH STREET
City-St-Zip: NEWBERRY, FL 32669

Title: D () Delete
Name: RHODES, PATRICK
Address: 725 NE 5TH TERRACE
City-St-Zip: GAINESVILLE, FL 326014304

Title: D () Delete
Name: TREMAINE, GORDON H
Address: 4440 SW ARCHER ROAD, APT. 1728
City-St-Zip: GAINESVILLE, FL 32608

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: GORDON TREMAINE

D

04/24/2008

Electronic Signature of Signing Officer or Director

Date