

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004104

FILED
Jul 07, 2009
Secretary of State

Entity Name: HOUSE OF GRACE CHURCH, INC.

Current Principal Place of Business:

5230 INDIAN HILL ROAD
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

6914 OAKMORE LANE
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 80-0414089 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:

CHERY, EVENS
6914 OAKMORE LANE
ORLANDO, FL 32818 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: CHERY, EVENS
Address: 6914 OAKMORE LANE
City-St-Zip: ORLANDO, FL 32818

Title: S () Delete
Name: CHERY, EMMANUEL
Address: 6212 RENEGARDE DRIVE, APT 206
City-St-Zip: ORLANDO, FL 32818

Title: VP/T () Delete
Name: JACQUES, JOEL J
Address: 1544 DESS DRIVE
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: CHERY, AMELDE
Address: 6914 OAKMORE LANE
City-St-Zip: ORLANDO, FL 32818

Title: VP/T (X) Change () Addition
Name: JACQUES, JOEL J
Address: 1544 DESS DRIVE
City-St-Zip: ORLANDO, FL 32818

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: EVENS CHERY

P

07/07/2009

Electronic Signature of Signing Officer or Director

Date