2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000672

Entity Name: GRACE MEDICAL HOME, INC.

FILED Jan 05, 2012 Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

51 PENNSYLVANIA STREET ORLANDO, FL 32806

Current Mailing Address: New Mailing Address:

51 PENNSYLVANIA STREET ORLANDO, FL 32806

FEI Number: 26-1817966 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GARRIS, STEPHANIE N GARRIS, STEPHANIE N ED 51 PENŃSYLVANIA STREET 51 PENNSYLVANIA STREET ORLANDO, FL 32806 ORLANDO, FL 32806

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.

01/05/2012 SIGNATURE: STEPHANIE GARRIS

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

CARPENTER, RITSY Name: Address: 825 SEVILLE PL. City-St-Zip: ORLANDO, FL 32804

Title:

Name: CARTER, KRISTIN

Address: 1545 CONWAY ISLE CIRCLE

City-St-Zip: ORLANDO, FL 32809

Title:

HARDY, MARVIN Name: 1111 BRYN MAWR ST. Address: City-St-Zip: ORLANDO, FL 32804

Title:

Name: KING, MARILYN CHR 358 VIRGINIA DR. Address: City-St-Zip: WINTER PARK, FL 32789

Title:

HORTON, LEIGH ANN TRES Name: 1115 SEVILLE PLACE Address: ORLANDO, FL 32804 City-St-Zip:

Title:

MORGAN, DIANNA VCHR Name: Address: 8284 TIBET BUTLER DR. WINDERMERE, FL 34786 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: STEPHANIE GARRIS ED 01/05/2012