

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005762

FILED  
Feb 09, 2010  
Secretary of State

**Entity Name:** GRACE COMMUNITY CENTER, INC.

**Current Principal Place of Business:**

4151 HANCOCK BRIDGE PKWY  
N FT MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

13 SE 21ST PLACE  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 26-2720721

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACKSON, CHRISTOPHER  
4151 HANCOCK BRIDGE PKWY  
N FT MYERS, FL 33903 US

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

JACKSON, CHRISTOPHER  
4151 HANCOCK BRIDGE PKWY  
N FORT MYERS, FL 33903 US

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:

02/09/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: MATHIS, BILL  
Address: 9299 PALM ISLAND CIR  
City-St-Zip: N FORT MYERS, FL 33903

Title: VP  
Name: WHITTAKER, DOUG  
Address: 9218 PALM ISLAND CIR  
City-St-Zip: N FORT MYERS, FL 33903

Title: SEC  
Name: WISE, GYLA  
Address: 14949 RANDOLPH DR SE  
City-St-Zip: FORT MYERS, FL 33905

Title: TRES  
Name: JOHNSON, KARL  
Address: 2142 W LAKEVIEW BLVD  
City-St-Zip: N FT MYERS, FL 33903

Title: D  
Name: HAMPTON, JOYCE  
Address: 2204 NW 7TH ST  
City-St-Zip: CAPE CORAL, FL 33993

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: KARL JOHNSON

TRES

02/09/2010

Electronic Signature of Signing Officer or Director

Date