

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010218

FILED
Aug 17, 2009
Secretary of State

Entity Name: THE GRACE MINISTRY OF HELPING HANDS, INC.

Current Principal Place of Business:

8834 GOODBY'S EXECUTIVE DRIVE
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

8834 GOODBY'S EXECUTIVE DRIVE
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 30-0527092 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

Name and Address of New Registered Agent:

MILLER, ROY
8834 GOODBY'S EXECUTIVE DRIVE
JACKSONVILLE, FL 32217 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MILLER, JAN
Address: 8834 GOODBY'S EXECUTIVE DRIVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: VP () Delete
Name: MCWRIGHT, KATHLEEN
Address: 8834 GOODBY'S EXECUTIVE DRIVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: S () Delete
Name: LEE, SANDY
Address: 8834 GOODBY'S EXECUTIVE DRIVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: T () Delete
Name: MILLER, ROY
Address: 8834 GOODBY'S EXECUTIVE DRIVE
City-St-Zip: JACKSONVILLE, FL 32217

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:

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: ROY MILLER

TREA

08/17/2009

Electronic Signature of Signing Officer or Director

Date