

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004040

FILED
Apr 22, 2010
Secretary of State

Entity Name: GRACIOUS LIVING SUPPORT SERVICES INC

Current Principal Place of Business:

3015 W DIXIE BLVD
FORT PIERCE, FL 34946

New Principal Place of Business:

Current Mailing Address:

3015 W DIXIE BLVD
FORT PIERCE, FL 34946

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLEOD, GWENDOLYN
3015 W DIXIE BLVD
FORT PIERCE, FL 34946 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
Name: GWENDOLYN, MCLEOD
Address: 3015 W DIXIE BLVD
City-St-Zip: FORT PIERCE, FL 34946

Title: COO
Name: COE, YVONNE
Address: 607 NORTH 27TH STREET
City-St-Zip: FORT PIERCE, FL 34947

Title: CFO
Name: MCBRIDE, ANGEL
Address: 604 SOUTH 7TH STREET
City-St-Zip: FORT PIERCE, FL 34946

Title: VP
Name: MCLEOD, NIGEL
Address: 3015 W DIXIE BLVD
City-St-Zip: FORT PIERCE, FL 34946

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: GWENDOLYN MCLEOD

P

04/22/2010

Electronic Signature of Signing Officer or Director

Date