

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000007268

**FILED**  
**Mar 08, 2011**  
**Secretary of State**

**Entity Name:** EVANGELICAL BAPTIST MINISTRIES OF GRACE.INC

**Current Principal Place of Business:**

17110 NW. 10TH STREET  
PEMBROKE PINES, FL 33028

**New Principal Place of Business:**

**Current Mailing Address:**

17110 NW. 10TH STREET  
PEMBROKE PINES, FL 33028

**New Mailing Address:**

**FEI Number:** 27-0660024

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LEMAINE, FRUTO PASTOR  
17110 NW 10TH STREET  
PEMBROKE PINES, FL 33028 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:** PD  
**Name:** LEMAIN, FRUTO  
**Address:** 17110 NW 10TH STREET  
**City-St-Zip:** PEMBROKE PINES, FL 33028 US

**Title:** VP  
**Name:** MOISE, ANNE  
**Address:** 17110 NW 10TH STREET  
**City-St-Zip:** PEMBROKE PINES, FL 33028 US

**Title:** SD  
**Name:** ADELINE NOEL,  
**Address:** 17110 NW 10TH STREET  
**City-St-Zip:** PEMBROKE PINES, FL 33028 US

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:** FRUTO LEMAIN

PD

03/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date