

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

DOCUMENT# N09000009468

**FILED**  
**Mar 05, 2011**  
**Secretary of State**

**Entity Name:** BLESSED GRACE MINISTRIES, INC.

**Current Principal Place of Business:**

6857 SW 36 COURT  
MIRAMAR, FL 33023

**New Principal Place of Business:**

**Current Mailing Address:**

6857 SW 36 COURT  
MIRAMAR, FL 33023

**New Mailing Address:**

**FEI Number:** 27-1203879

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FIGUEROA, XIOMARA  
6857 SW 36 COURT  
MIRAMAR, FL 33023 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:** FIGUEROA, XIOMARA  
**Address:** 6857 SW 36 COURT  
**City-St-Zip:** MIRAMAR, FL 33023

**Title:** VP  
**Name:** DARDON, ELBA  
**Address:** 1522 HALLAM DRIVE  
**City-St-Zip:** LAKELAND, FL 33813

**Title:** CFO  
**Name:** DARDON, JOSE E  
**Address:** 1522 HALLAM DRIVE  
**City-St-Zip:** LAKELAND, FL 33813

**Title:** TS  
**Name:** ROSARIO, GUILLERMO  
**Address:** 8767 NW 139TH TERRACE  
**City-St-Zip:** MIAMI LAKES, FL 33018

**Title:** SC  
**Name:** CASANOVA, MAURA  
**Address:** 4867 NW 168TH TERRACE  
**City-St-Zip:** MIAMI, FL 33055

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:** XIOMARA FIGUEROA

PD

03/05/2011

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

\_\_\_\_\_  
Date