

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

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

DOCUMENT# N09000012212

**Entity Name:** GRACE NEW COVENANT MINISTRIES, INC.

**Current Principal Place of Business:**

6405 FIVE ACRE ROAD  
PLANT CITY, FL 33565

**New Principal Place of Business:**

**Current Mailing Address:**

6405 FIVE ACRE ROAD  
PLANT CITY, FL 33565

**New Mailing Address:**

**FEI Number:** 27-1598688      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CRUZ, VICTOR  
6405 FIVE ACRE ROAD  
PLANT CITY, FL 33565      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: PRES  
Name: CRUZ, VICTOR  
Address: 6405 FIVE ACRE ROAD  
City-St-Zip: PLANT CITY, FL 33565

Title: VP  
Name: CRUZ, LORETTA R  
Address: 6405 FIVE ACRE ROAD  
City-St-Zip: PLANT CITY, FL 33565

Title: TREA  
Name: TIMME, LLOYD L  
Address: 1823 ERIN BROOKE DRIVE  
City-St-Zip: VALRICO, FL 33594

Title: SEC  
Name: TIMME, RENEE C  
Address: 1823 ERIN BROOKE DRIVE  
City-St-Zip: VALRICO, FL 33594

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: LLOYD L TIMME

TREA

02/08/2011

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

\_\_\_\_\_  
Date